

Tel: (410) 888-9110 Fax: (301) 725-2430

PERSONAL FINANCIAL STATEMENT					
AS OI	=;				
Name:	Date of Birth:				
Address:	SSN:				
	Residence Phone:				
Business Name:					
Business Address:	Business Phone:				
Position:					
Spouse Name:	Date of Birth:				
	SSN:				

Business Phone:

*List all amounts in dollars. Omit Cents.

Business Name: Business Address:

Position:

ASSETS	AMOUNT
Cash/Deposit Accounts (Sch. 1):	
Cash Value of Life Insurance (Sch. 2):	
Notes and Accounts Receivable:	
Marketable Stocks & Bonds (Sch. 3):	
Stock in Closely Held Corporations (Sch. 4):	
Assets in Partnerships & Joint Ventures:	
Vehicles, Boats, Machinery & Equipment (Sch. 5):	
Real Estate (Sch. 6):	
Vested Interest in Pension/Retirement Accts. (Sch. 7):	
Other Assets (Sch. 8):	
Total Assets:	

LIABILITIES AND NET WORTH	AMOUNT
Accounts Payable:	
Loans on Life Insurance (Sch. 2):	
Income Taxes Due:	
Liability of Partnerships/Joint Ventures:	
Loans on Vehicles, Boats, Etc. (Sch. 5):	
Mortgages/Loans on Real Estate:	
Other Loans Payable (Sch. 9):	
Other Liabilities:	
Total Liabilities:	
Net Worth:	
Total Liabilities & Net Worth:	

Personal Financial	Statement									PAGE 2
Name:								Date:		
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Schedule 1			CASH / D	<u>EP</u> C	SIT ACCOL	JNTS				
NAME OF BANK, SAVII		DEMA				F BANK, SAVIN		DEM.		TIME
LOAN, ETC. AND LO	CATION	DEPOS	SITS DEPOSIT	S	LOAN,	ETC. AND LOC	ATION	DEPO	SIIS	DEPOSITS
							TOTAL			
Schedule 2			LIFE	: INS	SURANCE					
NAME OF PERSON INSURED	BENEFICIAR	Y	POLICY OWNER		ACE AMOUNT	CASH	LOANS AG POLIC			CY ASSIGNED? O WHOM?
INSURED			OWNER	(D)	EATH BENEFIT)	VALUE	POLIC	Ť	- 10	O WHOM?
			TOTAL					,		
			·-							
Schedule 3	MARK	ETABL	E STOCKS A	ND	BONDS (NY	SE, AMX, N	ASDAQ)			
NUMBER OF SHARES/ FACE VALUE (BONDS)	DESCRIPTION	ON	REGISTERED NAME OF	IN	TO WHOM PLEDGED	DATE ACQUIRE		NT MKT		MARKET VALUE
								TOTAL		
								TOTAL		
Schedule 4 STOCK IN	N CI OSEI V	HEI D	ORPORATIO	SIAC	(Dlagge provide	E/S if total valu	io ovecede 10	0/ of vour	Not Wort	+b)
Schedule 4 STOCK II	V CLOSELT-	HELF (NUMBER OF		VALUE OF	ANNUAL			Net Wort	in)
NAME OF CORPORATION	STOCK IN NA	ME OF	SHARES		SHARES	STATEMENT	TOTAL SH OUTSTAN		% (OWNERSHIP
			OWNED		OWNED	DATE				
			TOTAL							
Schedule 5			ES, BOATS, I	MAC						
DESCRIPTION (INCLUDE YEAR, MAKE AND M		AR JIRED	COST		MARKET VALUE	LOAN BALANCI		DAN BLE TO	нс	OW PAYABLE
										per
										per
										per per
										per
										per
										per
										per
										per
										per

Personal Financial Statemen	nt					PAGE 3	
me:		-			Da	ate:	
nedule 6			REAL ESTAT	E			
ATION AND DESCRIPTION OF			COST			MORTGAGE PAYABLE TO	
PROPERTY NCLUDE DIMENSIONS OR ACRES AND % OWNERSHIP)	PROPERTY TYPE**	TITLE IN NAME OF	YR ACQUIRED	MARKET VALUE	MORTAGE BALANCE	HOW PAYABLE	
	_					per	
						per	
						·	
						per	
						per	
						per	
	_					per	
	_					per	
						nor	
			TOTAL			per	
Primary Residence, S=Secondary Re						4	
		EKESI IN FE	INSIDIN/NETINEI	MEINI ACCC	JUNIO		
		IN NAM	ME OF	INVE	STED WITH	MARKET VALUE	
ACCOUNT TYPE		IN NAM	ME OF	INVE	STED WITH	MARKET VALUE	
		IN NAM	IE OF	INVE	STED WITH	MARKET VALUE	
		IN NAM	1E OF	INVE	STED WITH	MARKET VALUE	
		IN NAM	ME OF	INVE	STED WITH		
ACCOUNT TYPE					ТОТ		
ACCOUNT TYPE		.SSETS (PERSO	ONAL PROPERTY, I		TOT.		
ACCOUNT TYPE		.SSETS (PERSO	ONAL PROPERTY, I		TOT.	AL _	
ACCOUNT TYPE		.SSETS (PERSO	ONAL PROPERTY, I		TOT.	AL _	
ACCOUNT TYPE		.SSETS (PERSO	ONAL PROPERTY, I		TOT.	AL _	

Schedule 9

OTHER LOANS PAYABLE

Schedule 9	OTHER LOANS PATABLE				
NAME AND ADDRESS OF LENDER	COLLATERAL PLEDGED AND NAMES OF COMAKERS OR ENDORSERS	ORIGINAL DATE	ORIGINAL AMOUNT/ CREDIT LIMIT	LOAN BALANCE	HOW PAYABLE
					per
	•	•	TOTAL		

		CONTINGENT LIABILITIES				
SOURCE OF INCOME		Are you indirectly liable for obligation of others?				
FOR YEAR ENDED		If yes, list and describe. If the obligation is for business or if you Need additional space, list and describe on an attachment.				
(Attach a copy of your most recent Income Tax R	Return and K-1's)	Name:				
	,	Amount:				
Salaries – Yours		Description:				
Salaries – Joint-Applicant: if applicable		Name:				
Bonuses & Commissions		Amount: Description:				
Dividends						
Interest		Total Amount as endorser, co-maker or guarantor Total Leases and contracts.				
Net Profits from:		PERSONAL INFORMATION				
Rental Property		Number of Dependants Ages Are you obligated to pay alimony, child support or separate maintenance payments?				
Proprietorships		If so, provide details:				
Partnerships						
Joint Ventures		Are you a defendant in any suits or legal actions? If so, describe:				
		Have you ever declared bankruptcy or had any judgments recorded against you? If so, explain circumstances. (Please include dates, location, amounts)				
Other Income: (Alimony, child support, separate-maintenance income need not beif you do not wish to have it considered as a basis for repaying this debt)						
		Do you have a will? If so, who is the executor?				
		Do you have disability insurance?				
		If so, what is the monthly amount?				
		What years are covered?				
The information contained in this financial statement is provided for the express purpose of obtaining, or maintaining surety credit on behalf of the undersigned. Further, the undersigned understands that Surety is relying on this information and warrants that this information is true and complete. The undersigned expressly agrees that the banks, persons, firms, and corporation above mentioned are hereby authorized to give the Surety any and all information in connection with the matters herein referred to, that the Surety deem pertinent.						
DATE	YOUR SI	IGNATURE				

JOINT SIGNATURE

DATE