

Personal Financial Statement

PRINCIPAL INFORMAT	ION				
Name:					
Residence Address:					
City:	State:		Zip Code:		
Business Name:		Position of Occupa	ation:		
Business Address:	Business Phone:				
City:	State:		Zip Code:		
Social Security #:		Date of Birth:	Mobile Phone:	Mobile Phone:	
ADDITIONAL PRINCIPA	AL INFORMATION (use se	parate sheets if necessary)			
Name:					
Residence Address:					
City:		State:	Zip Code:		
Business Name:		Position of Occupa	ation:		
Business Address:	Business Phone:				
City:		State:	Zip Code:		
Social Security #:	Date of Birth: Mobile Phone:				
	or liabilities are owned or owe owe or own in the appropriat		n someone other than co-principal,	indicate how the asset is	
Assets		Principal	Co-Principal	Joint	
Cash in Institutions - S	chedule A				
US Government Securities - Schedule B					
Securities Held by You	ı - Schedule B				
Other Equity Interest -	Schedule B				
Accounts and Notes R	eceivable				
Real Estate Owned - Schedule C					
Partnership Interest - Schedule D					
Automobiles					
Cash Value life Insurar	nce - Schedule E				
IRAs and 401ks					
Other Vested Retirement Accounts					
Other Assets - Itemize					
	TOTAL ASSETS				
Liabilities		Principal	Co-Principal	Joint	
Notes Payable this Bank - Schedule A					
Notes Payable other Institutions -Schedule A					
Notes Payable to Others					
Due on Margin Accounts - Schedule B					
Credit Cards and Othe	r Rille		1	İ	

	Unpaid Taxes			
Mortgage Loans - Schedule C or D				
Land Contacts - Schedule C or D				
	Life Insurance Loans - Schedule E			
	Other Liabilities - Itemize			
	TOTAL LIABILITIES			
	NET WORTH (Assets - Liabilities)			
	TOTAL LIABILITIES & NET WORTH			
		I		Т
	Sources of Income (Annual)	Principal	Co-Principal	Joint
	Salary			
	Bonus and Commissions			
	Dividend/Interest			
	Real Estate Income			
	Other Income* – Itemize			
	TOTAL INCOME			
*Alimony, Child Support or Separate Maintenance payments need not be disclosed unless relied upon as a basis for extension of credit. If disclosed, please indicate if payments received under Court Order, A32 Written Agreement, or Oral Understanding.				
	CONTINGENT LIABILITIES		ESTIMATED AMOUNT	
Do you have any contingent liabilities (as endorser, co-maker, guarantor on leases, or contracts?) If yes, fill in amount:				
	Pending legal claim? If yes, fill in amount:			
Outstanding letters of credit or other special debit circumstances? If yes, fill in amount:				
Income Tax Liens? If yes, fill in amount:				
	If yes to any question(s), please describe:			

SCHEDULES A - E (USE ADDITIONAL SCHEDULES IF NECESSARY)

Schedule A: Banks, Brokers, Savings and Loans Association, Finance Companies or Credit Unions

List here the names of all the institutions at which you maintain a deposit account and/or where you have obtained loans or lines of credit. We will need proof (via current account/bank statement) of liquidity.

Name of Institution	Current Balance	Maximum Credit	_
			-
			_
			-
Monthly Payment	Secured by What Assets	Maturity Dates	Outstanding Debt
Schedule B: US Government, Marketable and N	on-Marketable Securities		1
Number of Shares Face Value (Bonds)	Deposit Account Balance	High Credit	Amount Owing
Madrat Value	Ave they Diedwed?		
Market Value	Are they Pledged?		
	Yes No Yes No		
	Yes No Yes No		
	Yes No		
	Yes No		
Schedule C: Real Estate Owned (Please comple		ttach additional REO for	m, if necessary)
Schedule D: Partnership Interest			
Description of Property or Address	Title in Name of	Date Acquired	% Owned

Process Market Value	Mortgage of Land Contract Payable			
Present Market Value	Balance Owing	Monthly Payment Holder	Holder	
Schedule E: Life Insurance Carried, Including Group I	nsurance			
Name of Insurance Company	Owner Policy	Beneficiary	Face Amount	
Cash Surrender Value	Policy Loans			
I/we also hereby certify that no payment requirements listed I/we hereby authorize Lender or any credit bureau or other in from me or from any other person pertaining to my financial that the foregoing information is true and complete.	nvestigative agency employed b	y it to investigate any information I	isted herein, or obtained	
To the best of my knowledge and belief. The attached Financial SI an audited financial statement is available, it has been provided The financial statement(s) provided corresponds with Borrower's The verification of liquidity (cash, securities, etc.) is attached and	d. tax returns.	is a complete, true and an the financial statement.	accurate statement.	
I hereby certify that the above statements and additional info	ormation are true and correct.			
Signature of Principal/Borrower/Guarantor	Signature of Co	o-Principal/Co-Borrower/Co-Guaranto	r	
Principal Name	Additional Prin	Additional Principal Name		
Title	Title			
Date	Date			

Schedule C: Real Estate Owned				
This is prepared for: (If schedule is already prepared, you	u may disregard this	s form and attach your own.)		
Please complete or attach this form Partner, Managing Member and/or 50% interest in the entity. Please at	Guarantor, (iii) anyo	al Partner, Managing Member and/or Cone who controls either individually or to necessary.	Guarantor, (ii) anyone v hrough trusts or affiliat	who controls the General ed entities with more than
Real Estate Owned and Included	<u>in</u> Proposed Finan	cing		
Total Property Market Value	Ownership %	Total Market Value of Ownership %	Total Loan Balance	Total Monthly Debt Payment
Real Estate Owned and Not Include	ded in Proposed F	inancing		
Total Property Market Value	Ownership %	Total Market Value of Ownership %	Total Loan Balance	Total Monthly Debt Payment
Please provide a listing of all Multifa	mily properties in w	ase attach a list of all other Contingent hich the undersigned owns or has own nstrument on the property was purchas	ed either the property	
,	tements and addit	ional information are true and corre	ct.	
By:				
Name				
Title				
Date				