

If statement is joint please complete the following

Individual 1

Name: _____

Individual 2

Name: _____

NOTE: If there is a joint party to this financial statement who is either borrowing or guaranteeing the credit under consideration, the columns titled "Solely Owned-Individual 2" and "Solely Liab-Individual 2" must be filled out.

Assets		Solely Owned		Jointly Owned	Total
		Individual 1	Individual 2		
Cash (Includes CD's, Money Markets)	Schedule 1				
Publically Traded Investments	Schedule 2				
Non-Marketable Securities	Schedule 3				
Notes and Accounts Receivable					
Cash Value of Life Insurance	Schedule 4				
Personal Residence(s)	Schedule 5				
Other Real Estate	Schedule 5				
Personal Property					
IRA's, Keoughs & Other Qualified Plans					
Other Assets					
Total Assets					
Liabilities		Solely Liab		Jointly Liab	Total
		Individual 1	Individual 2		
Notes Payable to Banks-Secured	Schedule 6				
Notes Payable to Banks-Unsecured	Schedule 6				
Notes Payable to Others-Secured	Schedule 6				
Notes Payable to Others-Unsecured	Schedule 6				
Margin Accounts					
Accounts Payable (Include Credit Cards)					
Real Estate Mortgages Payable	Schedule 5				
Taxes Payable					
Loans on Life Insurance Policies	Schedule 4				
Other Liabilities					
Total Liabilities					
Net Worth					
Contingent Liabilities		Individual 1	Individual 2	Joint	Total
As Guarantor or Endorser	Schedule 7				
On Leases or Contracts	Schedule 7				
For legal Claims or Judgments	Schedule 7				
Tax Claims or Disputes	Schedule 7				
Letters of Credit	Schedule 7				
Future Capital Contributions	Schedule 7				
Other					
Total Contingent Liabilities					

Note: Contingent Liabilities Schedule must be completed. If none, then write "NONE" on schedule.

If the space provided is not sufficient, additional schedules may be attached.

Schedule 1 - Cash

Name and Location of Institution	Account Type and Number	Balance	Owned By	Pledged?

Schedule 2 - Publicly Traded Investments: Stocks, Bonds, Mutual Funds, 401k, IRAs

Face Value of Shares	Owned By	Description	Retirement (Yes/No)	Current Market Value	Amount Pledged

Schedule 3 - Non-Marketable Securities / Stock in Closely-Held Corporations

Face Value of Shares	% of Total Shares	Owned By	Description	Current Market Value	Amount Pledged

Schedule 4 - Life Insurance

Insurance Company	Owned By	Beneficiary	Face Value	Cash Value	Policy Loans	Amount Pledged

Schedule 5 - Real Estate (If partially owned, give total property information, not your share)

Description & Location	Owned By	%	Date Acquired	Cost	Value	Mortgage Balance	Monthly Payment	Net Yearly Cash Flow*

* Defined as total cash income less Debt Service, Taxes and Other Cash Expenses

Schedule 6 - Notes Payable (Exclude debt reported in Schedule 5)

Name and Address of Note Holder	Obligor	Type of Loan	Current Balance	Monthly Payment	Collateral

Schedule 7 - Statement of Contingent Liabilities

Corporation or Partnership Name	Financial Institution	Guaranty Percentage	Collateral	Loan Balance	Monthly Payment	Assisting repayment from own cash flow (Y/N)

Signature and Date _____ Signature and Date (other party if joint) _____

