

PERSONAL FINANCIAL STATEMENT

Use of company financial statement forms is not mandatory. They are made available as guides to the types of information needed. Signed statements on comparable bank forms, or on your accountants letterhead, are equally exceptable under most circumstances. Fiscal or year end statements are preferred. Schedules should be completed where they are meaningful. When in doubt, ask your agent about the company's specific requirements for the type of credit which you need.

Financial Statement of _____ SSN _____
(Name)

(Street Address, City, State, Zip)

FINANCIAL CONDITION AS OF _____,

ASSETS	AMT(S) ONLY	LIABILITIES	AMT(S) ONLY
Cash on Hand		Notes Payable to Banks	
Cash in following banks		(Name & Address):	
(Name & Address):			
Stocks and Bonds		Other Notes and Accounts Payable	
Listed (Schedule 1) -----		Real Estate Loans (Schedule 4) -----	
Unlisted (Schedule 1) -----		Sales Contracts & Sec. Agreements (Schedule 5) ---	
		Loans on Life Insurance (Schedule 6) -----	
Real Estate		Taxes Payable	
Improved (Schedule 4) -----		Current Year Income Taxes Unpaid -----	
Unimproved (Schedule 4) -----		Prior Year Income Taxes Unpaid -----	
Trust Deeds & Mortgages (Schedule 3) -----		Real Estate Taxes Unpaid -----	
Life Insurance		Other Liabilities	
Cash Surrender Value (Schedule 6) -----		Unpaid Interest -----	
Accounts & Notes Receivable		Other (Itemized) -----	
Relatives and Friends (Schedule 2/3)-----			
Other (Schedule 2/3) -----			
Doubtful (Schedule 2/3) -----			
Other Personal Property		TOTAL LIABILITIES:	
Automobile (Schedule 5) -----			
Other (Itemized, Schedule 5) -----		NET WORTH:	
TOTAL ASSETS:		TOTAL LIABILITIES & NET WORTH:	
ANNUAL INCOME		ANNUAL EXPENDITURES	
Salary or Wages -----		Professional Taxes & Assessments -----	
Dividends and Interest -----		Federal & State Income Taxes -----	
Rentals (Gross) -----		Real Estate Loan Payments -----	
Business or Professoinal Income (Net)-----		Payments on Contracts & Other Notes ---	
Other Income (Describe) -----		Insurance Premiums -----	
		Estimated Living Expenses -----	
		Other -----	
TOTAL INCOME:		TOTAL INCOME:	

To assist the Surety in its evaluation of the above Statement, I hereby certify that all material facts relating to the following conditionss are set forth in the attached exhibit(s)

incorporated herein by reference: Contingent liabilities as indorser, co-maker or guarantor \$ _____

Contingent liabilities on leases or contracts \$ _____; pledge or hypothecation of assets \$ _____;

Legal Claims \$ _____; Tax Liens \$ _____

(S) _____

1. STOCKS AND BONDS

Name of Security	No. Shares	If Any Pledged, State to Whom and for What Purpose	Dividends Paid Last Two Years	Market Value
TOTAL:				\$

2. ACCOUNTS RECEIVABLE

Name and Address (City and Street) From Whom Due	For What is Due	When Sold	When Due	Amount
TOTAL:				\$

3. NOTES RECEIVABLE

Name and Address (Street and City) for Whom Due	For What Due	How Secure	Date	Maturity	Amount
TOTAL:					\$

4. REAL ESTATE

Description of Property	Title in name of	Market Value	Cost	Amount Encumbrance	Monthly Payments	Monthly Income
TOTAL:			\$	\$	\$	\$

5. EQUIPMENT

Description and Capacity of Items	Age of Item	Market Value	Cost	Encumbrance	Monthly Payment
TOTAL:			\$	\$	\$

6. LIFE INSURANCE – CASH VALUE

Name of Company	Policy Number	Name of Insured	Beneficiary	Face Value	Cash Value	Amount Borrowed

The maker of the foregoing or accompanying statement hereby authorizes the company to confirm the bank balances claimed and all other items comprising said statement.

Date: _____

SIGNATURE: _____
