

PERSONAL FINANCIAL STATEMENT FOR COMMERCIAL NON-RESIDENTIAL REAL ESTATE

THIS STATEMENT PREPARED AS OF:

If there is insufficient space on any schedule, please include separate listings in similar detail.

If this is an application for joint credit, Borrower and Co-Borrower each agree that we intend to apply for joint credit (sign below):

Borrower		Co-Borrower		
PERSONAL INFORMATION				
NAME		SOCIAL SECURITY NUMBER	DATE OF BIRTH (n	nm/dd/yyyy)
NAME (if joint statement)		SOCIAL SECURITY NUMBER	DATE OF BIRTH (n	nm/dd/yyyy)
MARITAL STATUS		DEPENDENTS		
	ARRIED			
HOME ADDRESS (Street Address, City, State, Zip)				
PERSONAL PHONE NUMBER		PERSONAL E-MAIL ADDRESS	3	
BUSINESS PHONE NUMBER		BUSINESS E-MAIL ADDRESS		
EMPLOYER / ADDRESS		<u> </u>		
OCCUPATION / TITLE		SELF EMPLOYED	LENGTH OF SI	ERVICE
EMPLOYER / ADDRESS (if joint statement)		•		
OCCUPATION / TITLE		SELF EMPLOYED	LENGTH OF SI	ERVICE
ASSETS	AMOUNT	LIABIL	ITIES	AMOUNT
CASH At LSB	Amoonti	UNSECURED NOTES:	At LSB	Alloonti
At Other (Schedule 1) \$		At Other Banks	
SECURITIES Marketable		SECURED NOTES:	At LSB	
Non-Marketable			At Other Banks	
Restricted or Control (Schedule 2	.) \$ -	OTHER NOTES &		
LIFE INSURANCE CASH VALUE (Schedule 3		LEASES PAYABLE	(Schedule 7)	\$-
INVESTMENTS Closely Held Companies		CREDIT CARD BALANCES		
Partnership Interests				
Privately Owned Business (Schedule	4) \$ -	DUE TO BROKERS:	(Schedule 9)	\$-
REAL ESTATE Primary Residence		MORTGAGE LOANS:	Primary Residence	
Secondary Residence			Secondary Residence	
Investment (Schedule D) \$ -		Investment (Schedule D)	\$ -
NOTES RECEIVABLE: (Schedule 5) \$ -	CONTINGENT LIABILITIES	(Schedule 10)	\$-
RETIREMENT ACCOUNTS: (Schedule 6) \$ -	DUE ON AUTOMOBILES:		
AUTOMOBILES:				
OTHER PERSONAL ASSETS		OTHER LIABILITIES:		
(Itemize below or attach additional pages as needed)		(Itemize below or attach additional pages as needed)		
TOTAL ASSETS	\$ -	TOTAL LIABILITIES		\$-
	1	NET WORTH (Total Assets Min	us Total Liabilities)	\$-

Address of Property	Type of Property	Date Purchased	Title in the Name of	% of Ownership	Cost of Property	Cost of improvements in excess of purchase	Present Mkt Value	Amount of Mortgage	Mortgage Maturity Date	Gross Rental Income	Mortgage Payment	Net Income	Name of Lender
-							\$-	\$ -					

SCHEDULE D - SCHEDULE OF REAL ESTATE OWNED (Investments and Partial Interest)

The information contained in this statement is provided for the purpose of obtaining or maintaining credit with you on behalf of the undersigned, or persons, firms or corporations in whose behalf the undersigned may either severally or jointly with others, execute a guaranty in favor. Each undersigned understands that you are relying on the information provided lesignation made as to ownership of property) in deciding to grant or continue credit. Each undersigned represents and warrants that the information provided is true and complete and that you are authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein, and to determine my/our credit/worthiness. You are authorized to answer questions about your credit experience with me/us.

Signature:

Date:



SCHEDULE 1 - CASH: CHECKING, SAVINGS, CDs & MONEY MARKET FUNDS

NAME OF FINANCIAL INSTITUTION	TITLE OF ACCOUNT	TYPE OF ACCOUNT	AMOUNT
TOTAL			\$ -

SCHEDULE 2 - INVESTMENTS: LISTED MARKETABLE SECURITIES, MUTUAL FUNDS, AND ETFS

DESCRIPTION OF SECURITY (attach separate list if necessary)	REGISTERED	IN NAME OF	WHERE HELD	RESTRICTED	NO. SHARES	BOOK VALUE	MARKET VALUE	WHERE PLEDGED
TOTAL							\$-	

SCHEDULE 3 - LIFE INSURANCE

INSURANCE COMPANY	POLICY OF OWNER NAME OF INSURED	BENEEKLARY	POLICY FACE AMOUNT	POLICY LOANS	CASH VALUE	PREMIUM PAYMENTS	WHERE ASSIGNED
TOTAL					\$-		

SCHEDULE 4 - INVESTMENTS: CLOSELY HELD COMPANIES, NON-MARKETABLE SECURITIES & UNLISTED SECURITIES

NAME OF COMPANY	REGISTERED IN NAME OF	NO. SHARES % OWNED	DATE PURCHASED	MARKET VALUE	BALANCE DUE	WHERE PLEDGED
TOTAL				\$-		

SCHEDULE 5 - NOTES RECEIVABLE

DUE FROM	DUE TO	ORIGINAL AMT	PRESENT BALANCE	REPAYMENT TERMS	SECURITY HELD, IF ANY	DATE OF NOTE
TOTAL			\$ -			

SCHEDULE 6 - RETIREMENT ACCOUNTS: PENSION 401(K) & IRAs

NAME OF INSTITUTION WHERE HELD	TITLE OF ACCOUNT	TYPE OF ACCOUNT	% VESTED	MARKET VALUE
TOTAL				\$ -



SCHEDULE 7 - NOTES & LEASES PAYABLE: UNSECURED & SECURED INCLUDING MORTGAGES

OWED TO (ACCOUNT #)	BORROWER	MATURITY	BALANCE	MONTHLY PAYMENT	RATE	SECURED BY
TOTAL			\$-			

SCHEDULE 8 - CREDIT ACCOUNTS & LINES: CREDIT CARDS, CREDIT LINES & HOME EQUITY LINES

TOTAL			\$-			
ISSUER (ACCOUNT #)	ACCOUNT OWNER / BORROWER	CREDIT LIMIT	BALANCE	MONTHLY PAYMENT	RATE	SECURED BY

SCHEDULE 9 - DUE TO BROKERS

ISSUER (ACCOUNT #)	ACCOUNT OWNER / BORROWER	CREDIT LIMIT	BALANCE	MONTHLY PAYMENT	RATE	SECURED BY
TOTAL			\$-			

SCHEDULE 10 - OTHER CONTINGENT LIABILITIES:

	YES	NO	AMOUNT	IF YES, PLEASE EXPLAIN
Are you responsible for payment of alimony or child support?				
Are you a guarantor, endorser or co-maker on any note?				
Are you a defendant in any legal action or suit?				
Do you have any letters of credit or surety bonds outstanding?				
Do you have legal claims or judgments outstanding against you?				
Do you have any income tax obligations?				
Do you have any other tax obligations?				
Do you have any other contingent liabilities (Itemize below or attach additional pages as needed)				
TOTAL			\$ -	



PLEASE ANSWER THE FOLLOWING QUESTIONS:

1	I / We are applying for new credit? If yes, please indicate how you are applying:			Yes Individually	No Jointly
2	Income tax returns filed through (date: Are any returns currently being audited or contested? If yes, what year(s)?			Yes	No
3	Have you or any firm in which you were a major owner ever decl If yes, please provide details:	ared bankruptcy?		Yes	No
4	Have you drawn a will? If yes, please furnish the name of the executor(s) and year will w	as draw		Yes	No
5	Have you ever had a financial plan prepared for you?			Yes	No
6	Do you have an unused credit facility at any other institution(s)? If so, please indicate where, how much, and name of banker:			Yes	No
7	Do you anticipate any substantial inheritances? If yes, please explain:			Yes	No
8	Do you anticipate any material changes to this statement, within If yes, please explain:	the one year of its	s date?	Yes	No

CONTACT INFORMATION

NAME OF YOUR ACCOUNTANT	PHONE NUMBER
NAME OF YOUR ATTORNEY	PHONE NUMBER
NAME OF YOUR INVESTMENT ADVISOR / BROKER	PHONE NUMBER
NAME OF YOUR INSURANCE AGENT	PHONE NUMBER

REPRESENTATIONS AND WARRANTIES

The information contained in this statement is provided to induce you to extend or to continue the extension of credit to the undersigned or to others upon the guarantee of the undersigned. The undersigned acknowledge and understand that you are relying on the information provided herein in deciding to grant or continue credit or to accept a guarantee thereof. Each of the undersigned represents, warrants, and certifies that the information provided herein in true, correct and complete. Each of the undersigned agrees to notify you immediately and in writing of any change in name, address, or employment and of any material adverse change (1) in any of the information contained in this statement or (2) in the financial condition of any of the undersigned to perform its (or their) obligations to you. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. If the undersigned fails to notify you as required above, or if any of the indebtedness guaranteed by the undersigned, as the case may be, immediately due and payable. You are authorized to make all inquiries you deem necessary to verify the accuracy of the information contained herein and to determine the creditworthiness of the undersigned authorizes any person or consumer reporting agency to give you any information it may have on the undersigned. Each of the undersigned to you is outstanding, the undersigned shall supply annually an updated financial statement. This personal financial statement and any of the financial information in that the undersigned to purporerty.

SIGNATURE	DATE
SIGNATURE	DATE
SIGNATURE	DATE



STATEMENT NAME: STATEMENT DATE:

PERSONAL CASH FLOW STATEMENT

INCOME	LAST YEAR	CURRENT	NEXT YEAR
Salary & Wages (amount reported on W2) or Professional Net Income			
Bonus & Commissions			
Interest & Dividends			
Net Rental Income (Schedule 6)			
Business Income or Loss			
Trust Distributions			
Pension, Annuity & Social Security Income			
Other Income (Itemize below or attach additional pages as needed)			
TOTAL ANNUAL INCOME	\$ -	\$ -	\$

PRIMARY RESIDENCE	LAST YEAR	CURRENT	NEXT YEAR
1st Mortgage Payment			
2nd Mortgage Payment			
Real Estate Taxes			
Mortgage Insurance			
Homeowner's Insurance			
Flood Insurance			
Association Fees			
TOTAL PRIMARY RESIDENCE PITI	\$	- \$	- \$ -

OTHER REAL ESTATE	LAST YEAR	CURRENT	NEXT YEAR
1st Mortgage Payment			
2nd Mortgage Payment			
Real Estate Taxes			
Mortgage Insurance			
Homeowner's Insurance			
Flood Insurance			
Association Fees			
TOTAL OTHER REAL ESTATE PITI	\$-	\$-	\$ -

OTHER EXPENSES	LAST YEAR	CURRENT	NEXT YEAR
Credit Card Payments			
Rental Payments			
Interest & Principal Payment on Loans			
Insurance Premiums			
Investments			
Alimony, Child Support & Tuition*			
Personal Income Taxes			
Personal Living Expenses			
Other Expenses (Itemize below or attach additional pages as needed)			
TOTAL OTHER EXPENSES	\$ -	\$-	\$ -
TOTAL ANNUAL EXPENSES	\$-	\$-	\$-
CASH FLOW SURPLUS (DEFICIT)	\$-	\$-	\$-

* Inclusion of alimony, separate maintenance, or child support as income is voluntary and need not be revealed, if you do not wish to have it considered. If you choose to include such payments, please describe it by the court and case number, the amount and the name and address of the person obligated to pay that amount to you. If you are responsible for paying alimony, separate maintenance, or child support, please give particulars of that obligation, along with your other obligations.



SUPPORTING DOCUMENTATION CHECKLIST

Please attach copies of the following documents:

Last two (2) years federal and state tax returns, including all schedules and statements Most recent W2 Most recent pay stub

LIQUID ASSETS

	Most recent account statements, not older than 90 days
	Checking
H	Savings
	Brokerage/Trust/Custody
	Mutual Funds
	IRA/401(k)/Pension
	Other:
NOTES, DANS &	LINES OF CREDIT
	Most recent account statements, not older than 90 days
	Mortgage on Primary Residence
	Home Equity Line of Credit on Primary Residence
	Mortgages on Other Real Estate
	Notes and Lines from Banks
	Automobile Loans & Leases
	Consumer Loans and Credit Cards
	Other:
	& OBLIGATIONS
	If you wish us to consider other income, please submit copies of documentation to s

If you wish us to consider other income, please submit copies of documentation to support such income. If you are required to make alimony or child support payments, please include a copy of the appropriate section of the divorce decree or separation agreement

OTHER DOCUMENTS REQUESTED BY YOUR BANKER

