

PERSONAL FINANCIAL STATEMENT

FINANCIAL CONDITION AS OF _____, 20 ___ PLEASE FILL IN ALL BLANKS, WRITING "NO" OR "NONE" WHERE NECESSARY TO COMPLETE INFORMATION AND SIGN IN INK ON THE REVERSE SIDE.

Section 1 - BORROWER/GUARANTOR (please pr												
Last Name First				Initial Date of Birth			Social Security Nun			mber		
Present Street Address			City			State Zip						
			•				, i					
ow Long at Present Address?			Cell Number				Business Number					
Business Name/Employer	1		Position	<u> </u> 1			Length of Em	ployment	t			
Business Address			City				State		Zip			
Previous Employer			Position				Length of Em					
							Phone of nearest relative					
Name of nearest relative (not living with you)			Relationship				Prione of nea					
Address of nearest relative			City				State					
Costion 2 CO DODDOMED/CHADANTOD /place		N										
Section 2 - CO-BORROWER/GUARANTOR (pleas Last Name	First	.)			Initial	Date of Birth		Social Se	ecurity Nu	mber		
			0.11				10.		_			
Present Street Address			City				State		Zip			
How Long at Present Address?	ng at Present Address?			Cell Number				Business Number				
Business Name/Employer			T Position				Length of Employment					
Business Name/Employer			Position				Lengur or En					
Business Address			City				State Zip					
Previous Employer			Position				Length of Employment					
• •			1 osition				Longitt of Employment					
Name of nearest relative (not living with you)			Relationship				Phone of nearest relative					
Address of nearest relative			City				State Zip					
ASSETS		In Dollars	LIABILITIES			Origi	nal Balance	Cur Bala		Mon Paym	-	
Cash in Financial Institutions - Complete Schedule F - reverse side	,		Notes Payable									
Accounts, Loans, & Notes Receivable			То Ва	anks								
Stocks, Bonds, Mutual Funds - Complete Schedule A			To Others									
Real Estate - Complete Schedule B			Installm	ents Payable								
Other Personal Property - Furniture, Art, Valuables			Automobile									
	Value:		Automobile									
Year Make			Other (Medical, Chg Accts, etc) Other (Medical, Chg Accts, etc)									
Automobile:			Obligations on Real Estate -Schedule B									
Automobile: Retirement Accounts - Complete Schedule G			Other Liabilities (Itemize)									
Other Assets (Itemize)			Carer Elabilities (Iterrize)									
,												
			TOTAL	LIABILITIES								
TOTAL ASSETS			NET W	ORTH (ASSETS - LI	ABILITIE	(S)						
SOURCE OF INCOME				,		RSONAL IN	FORMATI	ON				
Income from alimony, child support or maintenance payments need not be r								YES	NO	Estim Amo		
income listed on this credit statement will be considered in determining your credit worthiness. If alimony, child support or maintenance income is disclosed here, credit information concerning the payor may be required to			Contingent liabilities?									
determine the extent that such payments are likely to be consistently made.			Co-mak	er or guarantor?								
n	Monthly	Amount	Involve	d in pending legal acti	ion?							
Type of Income:	er	Co-Borrower	Other special debt/circumstances?									
□ Base Salary			Contested income tax liens?									
□ Bonus and commissions □ Dividends and interest income			Are any assets pledged? Are you obligated to pay alimony, child support, or mainter				ntenance?					
□ Real Estate income (Net)			Total Contingent Liabilities									
☐ Other income - itemize								J				
										YES	NO	
			Are any	of the assets listed a	bove he	ld in a trust?						
			Are any	debts past due?								
Monthly Amount				Have you ever had any auto, furniture, or other property repossessed?								
Type of Income: Borrows	er	Co-Borrower	Have you ever filed for Bankruptcy?						_			
☐ Alimony		Have you applied for a loan at any Financial Institution in the last six months?										
☐ Child Support or Maintenance ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐			If any of the above are yes, please explain:									
Total Income												

INITIAL HERE:	

Schedule A - Stocks, Bonds, Mutual Funds												
ochedale A - Stocks, Bollas	, inutual rungs											
Number of Shares	Description	In Name of		Are These Registered or Pledged to Others? If so, who?		Market Value		Source of Value				
			+									
						Total						
Schedule B - Residences an	nd Other Real Estate, Includir	ng Equities	(Partially or W	/holly Owned	I)							
					,	Your Percei						
Location	Property Type	Date Acquired	% Ownership	Value	Debt	Equity	Annual Income	Expens (includi	es ng debt)	Annual Net Income		
			, , , , , , , , , , , , , , , , , , ,					(
										-		
			Totals							-		
			Totals									
Schedule C - Life Insurance	1					I		1				
Name of Insurance Company	any Owner of Policy Beneficiary			nd Relationship Face Amount			t Policy L		oans	Cash Value		
												
					Totals							
Schedule D - Bank and Othe	or Institutional Borrowings							•				
Schedule D - Bank and Othe	i institutional Borrowings								Ι			
Name of Lender	Original Amount	Maturity D	ate	Unsecured or Secured (List Colla		eral)	Amount Owed		Paymer	nt Amount		
						Total						
Ochodula E. Businesa Vant									1			
Schedule E - Business vent	ures/Partnerships/LLCs, etc.	1		Vour %	I					Years in		
Name of Business		Title		Your % Ownership Net Worth of Business			Type of Bus	iness	Business			
										-		
]		
Schedule F - Cash in Banks	, Credit Unions, etc.											
Name of Financial Institution				Type of Acco	unt				Present	t Balance		
				Total						1		
Schedule G - Retirement Ac	counto			Total								
	counts			Type of Account % Vested					Amount			
Name of Financial Institution				Type of Acco	% vesteu		Amount					
								Total				
	F APPRAISALS. We may order ar					s appraisal. W	e will promptly	y give yo	u a copy	of any		
appraisal, even if your loan does	not close. You can pay for an add	ditional appra	aisal for your own	use at your ow	n cost.							
	he reverse side hereof, and any of				loss statements as to	ownership, whi	ch are given t	to the Ba	nk by the	undersigned have		
been carefully read by the unders	igned and the information therein o	contained is o	complete, true an	a correct.								
The undersigned will immediately	and without delay notify Brighton E	Bank if anv c	hange occurs tha	t materially redu	uces the means or abil	tv of the unders	signed to pay	all debts.	claims o	r demands against		
The undersigned will immediately and without delay notify Brighton Bank if any change occurs that materially reduces the means or ability of the undersigned to pay all debts, claims or demands against the undersigned. In the absence of such notice or until another statement is submitted to the Bank by the undersigned, the Bank may continue to rely on the accuracy of this statement in continuing												
existing credit or extending additional credit to the same extent as if this statement were originally submitted to the Bank at the time credit was continued or extended.												
The undersigned agree(s) that if any of the foregoing representations are untrue or if the undersigned fail(s) to give notice of any material change in any of the matters above specified, Brighton Bank may at its option declare all of the obligations of the undersigned (or any of them) to the Bank immediately due and payable without demand or notice.												
In connection with this application for credit the applicant authorizes and requests all persons listed above and all Consumer Reporting Agencies to furnish Brighton Bank Consumer Reports and/or												
Investigative Consumer Reports on this Applicant.												
□ I am applying for individual credit.												
□ We are applying for joint credit. FOR JOINT CREDIT, INITIAL HERE: Borrower Co-Borrower												
Primary Applicant's Signatu	ire		Date	Addi	tional Signature, if	joint applica	tion			Date		
BANK USE ONLY:	D/I:			FICC):	Date I	Received:					