

**FINANCIAL STATEMENT**

Use of company financial statement forms is not mandatory. They are made available as guides to the type of information needed. Signed statements on comparable bank forms, or on your accountant's letterhead, are equally acceptable 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 \_\_\_\_\_ (Name)

(Street Address, City, State, ZIP)

Applicant's Social Security No.: \_\_\_\_\_ Spouse's Social Security No.: \_\_\_\_\_

FINANCIAL CONDITION AS OF \_\_\_\_\_, 20 \_\_\_\_\_

ASSETS	AMT(S) ONLY	LIABILITIES	AMT(S) ONLY
<b>Cash on Hand</b>		<b>NOTES PAYABLE TO BANKS</b>	
<b>Cash in following Banks (name &amp; address):</b>		<b>name &amp; address):</b> .....	
.....		.....	
.....			
<b>STOCKS AND BONDS</b>		<b>OTHER NOTES AND ACCOUNTS PAYABLE</b>	
Listed (Schedule 1).....		Real Estate Loans (Schedule 4).....	
Unlisted (Schedule 1).....		Sales Contracts & Sec. Agreements (Schedule 5).....	
<b>REAL ESTATE</b>		Loans on Life Insurance Policies (Schedule 6).....	
Improved (Schedule 4).....		<b>TAXES PAYABLE</b>	
Unimproved (Schedule 4).....		Current Year Income Taxes Unpaid.....	
Trust Deeds & Mortgages (Schedule 3).....		Prior Year Income Taxes Unpaid.....	
<b>LIFE INSURANCE</b>		Real Estate Taxes Unpaid.....	
Cast Surrender Value (Schedule 6).....		<b>OTHER LIABILITIES</b>	
<b>ACCOUNTS AND NOTES RECEIVABLE</b>		Unpaid Interest.....	
Relatives and Friends (Schedule 2/3).....		Other (Itemize).....	
Other (Schedule 2/3).....		.....	
Doubtful (Schedule 2/3).....		<b>TOTAL LIABILITIES</b> .....	
<b>OTHER PERSONAL PROPERTY</b>			
Automobile (Schedule 5).....		<b>NET WORTH</b> .....	
Other (Itemize, Schedule 5).....			
<b>TOTAL</b>		<b>TOTAL</b>	

ANNUAL INCOME	(Refer to Federal Income Tax Returns for Previous Year)	ANNUAL EXPENDITURES	(Refer to Federal Income Tax Returns for Previous Year)
SALARY OR WAGES .....		PROPERTY TAXES AND ASSESSMENTS.....	
DIVIDENDS AND INTEREST .....		FEDERAL AND STATE INCOME TAXES .....	
RENTALS (GROSS).....		REAL ESTATE LOAN PAYMENTS .....	
BUSINESS OR PROFESSIONAL INCOME (NET) .....		PAYMENTS ON CONTRACTS & OTHER NOTES .....	
OTHER INCOME (DESCRIBE) .....		INSURANCE PREMIUMS .....	
.....		ESTIMATED LIVING EXPENSES .....	
.....		OTHER .....	
<b>TOTAL INCOME</b>		<b>TOTAL INCOME</b>	

To assist the Surety in its evaluation of the above Statement, I hereby certify that all material facts relating to the following conditions are set forth in the attached exhibit(s) incorporated herein by reference: Contingent liabilities as endorser, 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 (street and city) From Whom Due	For What Is It Due	When Sold	When Due	Amount
TOTAL				\$

**3. NOTES RECEIVABLE**

Name and Address (street and city) From Whom Due	For What Due	How Secured	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.

Dated \_\_\_\_\_, 20\_\_\_\_

SIGNATURE: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_