PERSONAL FINANCIAL STATEMENT AS OF ____ SUBMITTED TO:

		CODIN	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·								
				P	ERSONAL I	NFORMATION						
APPLICAN	T (NAME)					CO-APPLICANT (NAME)						
Employer						Employer						
Address of Empl	oyer					Address of Employer						
Business Phone No. SSSSSSSS	No. of Years	s with Employer	Title/Position			Business Phone No.	No. of Years with Employer Title/Position					
	s employer & p	oosition (if with curre	nt employer less	s than 3 yrs.)	No. of Yrs.	Name of previous employer & position (if with current employer less than 3 yrs.) No. of Yrs.						
Home Address						Home Address						
Home Phone No. Social Security No. Date of Birth						Home Phone No. Social Security No. Date of Birth						
Name, Phone No. of your Accountant						Name, Phone No. of your Accountant						
Name, Phone No. of your Attorney						Name, Phone No. of your Attorney						
Name, Phone No. of your Investment Advisor/Broker						Name, Phone No. of your Investment Advisor/Broker						
Name, Phone No. of your Insurance Advisor						Name, Phone No. of your Insurance Advisor						

Cash Income & Expenditures Statement For Year Ended _ (Omit cents)

ANNUAL INCOME	AMOUNT (\$)
Salary (applicant)	\$
Salary (co-applicant)	
Bonuses & Commissions (applicant)	
Bonuses & Commissions (co-applicant)	
Rental Income	
Interest Income	
Dividend Income	
Capital Gains	
Partnership Income	
Other Investment Income	
Other Income (List)**	
TOTAL BIOCHE	
TOTAL INCOME >	\$

ANNUAL EXPENDIT	Αľ	MOUNT (\$)	
Federal Income and Other	\$		
State Income and Other Ta	ixes	\$	
Rental Payments, Co-op, o	r		
Condo Maintenance			
Mortgage Payments	Residential		
	Investment		
Property Taxes	Residential		
	Investment		
Interest & Principal			
Payments on Loans			
Insurance			
Investments (including tax			
Alimony/Child Support			
Tuition			
Other Living Expenses			
Medical Expenses			
Other Expense (List)			
TOTAL EXPE	NDITURES >	\$	

Any significant changes expected in the next 12 months? Yes No (If yes, attach information.)

** Income from alimony, child support, or separate maintenance income need not be revealed if the applicant or co-applicant does not wish to have it considered as a basis for repaying this obligation.

Dalance Sheet as of								
ASSETS	AMOUNT (\$)	L	IABILITIES		AMOUNT ((\$)		
Cash in this Bank		Notes Payable to t	XXX	•				
(including money market accounts, CD's)	\$	Secured						
Cash in Other Financial Institutions (List)		Unsecured						
(including money market accounts, CD's)		Notes Payable to 0	Others (Sched	ule E)	X X X	X		
, ,		Secured		,				
		Unsecured						
		Accounts Payable	(including cre	dit cards)				
		Margin Accounts	·					
Readily Marketable Securities (Schedule A)		Notes Due: Partne	ership (Schedu	le D)				
Non-Readily Marketable Securities (Schedule A)		Taxes Payable						
Accounts and Notes Receivable		Mortgage Debt (So						
Net Cash Surrender Value of Life Insurance (Schedule B)		Life Insurance Loa		B)				
Residential Real Estate (Schedule C)		Other Liabilities (L	ist):					
Real Estate Investments (Schedule C)								
Partnership / PC Interests (Schedule D)								
IRA, Keogh, Profit-Sharing & Other Vested Retirement Accts.								
Deferred Income (number of years deferred)								
Personal Property (including automobiles) Other Assets (List):								
Offier Assets (List):								
			TOT	AL LIABILITIES				
				NET WORTH				
	\$				\$			
		1						
CONTINGENT LIABILITIES			YES	NO	AMOUNT			
			_	_				
Are you a guarantor, co-maker, or endorser for any debt of an	individual, corporation	on, or partnership?	Ш	 \$				
Do you have any outstanding letters of credit or surety bonds?)							
Are there any suits or legal actions pending against you?								
Are you contingently liable on any lease or contract?								
Are any of your tax obligations past due?				\Box				
What would be your total estimated tax liability if you were to sell your major assets?								
If yes for any of the above, give details:								
Schedule A – All Securities (including non-money market	mutual funds)							
No. of Shares	inutuai iunus)				PLEDGE	ED.		
(Stock) or Face DESCRIPTION OWNER(S	S) WH	IERE HELD	COST	CURRENT				
Value (Bonds)				MARKET VALU	E YES	NO		
READILY MARKETABLE SECURITIES (including U.S. Governments and Municipals)*								
						무-		
						$\frac{\Box}{\Box}$		
		1				=		
						Ш		
NON-READILY MARKETABLE SECURITIES (closely held, thinly traded, or restricted str	ock)							

^{*}If not enough space, attach a separate schedule or brokerage statement and enter totals only.

Schedule B – Insurance Life Insurance (use additional	sheet if nec	ecary)									
Insurance Company	Face Amount of Policy	Face Amount of		Beneficiary		Cash Surrender Value		Amount Borrowed		Ownership	
		1									
Disability Insurance			Applicant		Co-Applicant						
Monthly Distribution if Disabled											
Number of Years Covered											
Schedule C – Personal Resid	ence & Rea	I Estate	Investm	ents, Morta	age Debt (m	ajority	owner	ship only	/)		
Personal Residence						Pres	sent	Inter-	Loan		
D	Lega			ırchase	Market	Lo		est	Maturity	Monthly	
Property Address	Owne	er	Year	Price	Value	Bala	ince	Rate	Date	Payment	Lender
								.			
Investment	Logol		Purchase		Pre:		sent an	Inter- est	Loan Maturity	Monthly	
Property Address	Legal Owner		Year Price				ince	Rate	Date	Payment	Lender
1 Topony / tauross			1 0 01	11.00	Julius Built				54.0	. ajiiiaii	2011401
								1			
Schedule D – Partnerships (le	ess than ma	ijority ov	vnership	for real es	tate partner	ships)*					
•		Date	of			<u> </u>				ce Due on	Final
Type of Investment		Initial Investment		Cost	Percent Owned		Current Market Value			nerships: Cash Call	Contribution Date
Business/Professional (Indicate name):						Owned		4.40	110100)	ouen oun	Date
, ,											
Investments (Including Tax Shelters):											
* Note: For investments which repartnership investments or S-corpo	oresent a mate orations, sche	erial portio dule K-1s.	n of your	total assets, p	olease include	the relev	ant fina	ancial state	ments or tax ı	returns, or in th	e case of
Schedule E – Notes Payable											

Secured

Yes

No

 Collateral

Interest

Rate

Maturity

Amount of Line

Unpaid Balance

Type of Facility

Due to

Ple	ase Answer The Following Questions:							
1.	Income tax returns filed through (date): Are any returns currently being audited or contested?							
2	If yes, what year(s)? Have (either of) you or any firm in which you were a major owner ever declared bankruptcy?							
2.	If yes, please provide details:							
3.	Have you drawn a will? Yes No							
	If yes, please furnish the name of the executor(s) and year will was drawn:							
4.	Number of dependents (excluding self) and relationship to applicant:							
5.	Have you ever had a financial plan prepared for you?							
6.	Did you include two years federal and state tax returns?							
7.	Do (either of) you have a line of credit or unused credit facility at any other institution(s)? Yes No							
	If so, please indicate where, how much, and name of banker:							
8.	Do you anticipate any substantial inheritances?							
	If yes, please explain:							
	7							
Rep	presentations and Warranties							
gua cred Eac the oblig und the mak und ansi	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 rantee of the undersigned. The undersigned acknowledge and understand that you are relying on the information provided herein in deciding to grant or continue lit or to accept a guarantee thereof. Each of the undersigned represents, warrants and certifies that the information provided herein is true, correct and complete. In 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 information contained in this statement or (2) in the financial condition of any of the undersigned or (3) in the ability of any of the undersigned to perform its (or their) agations 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 ersigned fail to notify you as required above, or if any of the information herein should prove to be inaccurate or incomplete in any material respect, you may declare indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, immediately due and payable. You are authorized to be all inquiries you deem necessary to verify the accuracy of the information contained herein and to determine the credit-worthiness of the undersigned. The ersigned authorize any person or consumer reporting agency to give you any information it may have on the undersigned. Each of the undersigned authorizes you to wer questions about your credit experience with the undersigned. As long as any obligation or guarantee of the undersigned to you is outstanding, the undersigned I supply annually an updated financial statement. This personal financial statement and any other financial or other information that the undersigned give you shall be reproperty.							
Ē	oate Your Signature							
-								
Ī	Co-Applicant's Signature (if you are requesting the financial accommodation jointly)							