



Complete this form for: (1) each proprietor; (2) general partner; (3) managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant (including the assets of the owner's spouse and any minor children); and (5) any person or entity providing a guaranty on the loan.

Name	Birth Date
Spouse Name	Spouse Birth Date
Residence Address	Business Phone
City / State / Zip Code	Personal Phone Residence Cell
Residence Status: US Citizen Permanent Resident Other	Veteran Status: Veteran Non Veteran

Business Name of Applicant/Borrower

The following race/ethnicity information if requested by the Federal government in order to monitor our compliance with various civil rights laws. You are not required to furnish this information but are encouraged to do so. The law required that the Lender may not discriminate based upon this information, nor on whether you choose to furnish it. However, if you choose not to furnish it, under Federal regulations, Lender is required to note the race and sex on the basis of visual observation or surname. This information will not be used in evaluating your application or to discriminate you in any way.

African American Hispanic or Latino Native American or Native Alaskan Native Hawaiian or Other Pacific Islander Asian Caucasian Other

Assets	(Omit cents)	Liabilities	(Omit cents)
Cash on hand and in banks	\$ _____	Accounts payable	\$ _____
Savings accounts	\$ _____	Notes payable to banks and others (Section 2)	\$ _____
IRA or other retirement accounts (Section 5)	\$ _____	Monthly payments:	
Accounts and notes receivable (Section 5)	\$ _____	Installment loans—auto	\$ _____
Life insurance—Cash surrender value (Section 8)	\$ _____	Monthly payments:	
Stocks and bonds (Section 3)	\$ _____	Installment loans—other	\$ _____
Real estate (Section 4)	\$ _____	Loans against life insurance	\$ _____
Automobiles (Section 5 including year, make and model)	\$ _____	Mortgages on real estate (Section 4)	\$ _____
Other personal property (Section 5)	\$ _____	Unpaid taxes (Section 6)	\$ _____
Other assets (Section 5)	\$ _____	Other liabilities (Section 7)	\$ _____
Total Assets	\$ _____	Total liabilities	\$ _____
		Net worth	\$ _____
		Total Liabilities and Net Worth <i>(must equal Total Assets)</i>	\$ _____

Section 1. Source of Income—Annual

Salary and wages	\$ _____
Net investment income	\$ _____
Real estate income	\$ _____
Other income (describe below)*	\$ _____

Contingent Liabilities

As endorser or co-maker	\$ _____
Legal claims and judgments	\$ _____
Provision for federal income tax	\$ _____
Other special debt	\$ _____

Description of Other Income in Section 1

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*Alimony or child support payments need not be disclosed in "Other income" unless it is desired to have such payments counted toward total income.

Section 2. Notes payable (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

Name and Address of Noteholder(s)	Original Balance	Current	Payment	Frequency (e.g. monthly)	How Secured or Endorsed Type of Collateral

Section 3. Stocks and Bonds (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

Number of Shares	Name of Securities	Cost	Market Value	Date of	Total Value

Section 4. Real Estate Owned (List each parcel separately, using attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C
Type of real estate (e.g. primary residence, other residence, rental property, land, etc.)			
Property address			
Date purchased			
Original cost			
Current market value			
Name / address of mortgage holder			
Mortgage account number			
Mortgage balance			
Monthly / annual payment amount	/mo /yr	/mo /yr	/mo /yr
Status of mortgage			

Section 5. Other Assets and Personal Property (Describe—if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency)

Section 6. Unpaid Taxes (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches)

Section 7. Other Liabilities (Describe in detail)

Section 8. Life Insurance Value (Give face amount and cash surrender value of policies - name of insurance company and beneficiaries)

I/We authorize Lender to make inquiries as necessary to verify the accuracy of the statements made and to determine my/our creditworthiness. I/We certify that all information on this form and any additional supporting information submitted with this form is true and complete to the best of my/our knowledge. These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I/We understand any false statements may result in forfeiture of benefits and possible prosecution.

Signature: _____ Date: _____ Social Security Number: _____

Signature: _____ Date: _____ Social Security Number: _____