INDIVIDUAL FINANCIAL STATEMENT

NAME	ADDRESS	TELEPHONE NUMBER
BUSINESS	ADDRESS	TELEPHONE NUMBER
		BIRTH DATE

The Undersigned, for the purpose of procuring and establishing credit from time to time with you and to induce you to permit the Undersigned to become indebted to you on notes, endorsements, guarantees, overdrafts, commercial paper, chatter paper or otherwise, furnishes the following (or in lieu thereof the attached) which is the most recent statement prepared by or for the Undersigned and which is hereby warranted as being the most recent statement prepared by or for the Undersigned as constituting a full, true and correct statement of the financial condition of the Undersigned on the date shown below, agrees to notify you Immediately of the extent and character of any material adverse change in said financial condition; and agrees that if the Undersigned or any endorser or guarantor of any of the obligations of the Undersigned at any time fails in business or becomes insolvent, or commits an act of bankruptcy, should make an assignment for benefit of or offer a composition or extension with creditors, or dies, fails to pay when due any obligation to you, claims homestead exemption on real property listed in this statement, fails to notify you immediately of any material adverse change in financial condition as shown herein, fails to remove any lien or encumbrance or liquidate any liability when requested as a condition to any borrowing from you, or any proceedings under the Federal Bankruptcy Act are commenced by or against the Undersigned, a receiver is appointed for the Undersigned's business or property or any part thereof, or if any assessment for taxes against the Undersigned, other than taxes on real property, is made by any government or political subdivision thereof, or if the business, or any interest therein of the Undersigned is sold, or if the Undersigned fails to notify you of any material adverse change of financial condition, or the Undersigned's financial condition shall in your opinion so deteriorate to the extent that you in good faith shall deem yourself insecure, then and in any such event, all of the obligations of the Undersigned to you and held by you shall at your option immediately become due and payable without demand or notice, except as otherwise provided by law; and further, any commitments or obligations to grant credit to the Undersigned or for the Undersigned's benefit shall be immediately terminated.

The Undersigned agrees to keep proper, accurate and current books of account and other records, and to produce them for examination, audit and inspection by any accountant or representative selected by you, to permit copies thereof or extracts therefrom to be made for you, and to comply with all requests for information concerning the Undersigned's affairs and for the inspection of the Undersigned's records, whether or not confidential.

FINANCIAL CONDITION AS OF _____ 2020

ASSETS		AMOUNT		LIABILITIES		AMOUNT	
CASH	Bank			NOTES PAYABLE TO BANKS	Bank		
	Other Bank (Detail)				Other (Itemize, Schedule 4)		
STOCKS AND BONDS	Listed (Schedule 1)			OTHER NOTES AND ACCOUNTS PAYABLE	Real Estates Loans (Schedule 2)		
	Unlisted (Schedule 1)				Sales Contracts & Sec. Agrmts. (Sch. 4)		
					Loans on Life Insurance Policies (Sch. 4)		
REAL ESTATE	Improved (Schedule 2)						
	Unimproved (Schedule 2)			TAXES PAYABLE	Current Year's Income Taxes Unpaid		
	Trust Deeds & Mortgages (Schedule 3)				Prior Year's Income Taxes Unpaid		
					Real Estate Taxes Unpaid		
LIFE INSURANCE	Cash Surrender Value						
				OTHER LIABILITES	Unpaid Interest		
ACCOUNTS AND NOTES RECEIVABLE	Relatives and Friends (Schedule 4)				Others (Itemize, Schedule 4)		
	Collectible (Schedule 4)				Auto Loan		
	Doubtful (Schedule 4)				Credit Card		
OTHER PERSONAL PROPERTY	Automobile				**TOTAL LIABILITEIS**		
	Other (Itemize, Schedule 4)				**NET WORTH**		
	TOTAL				**TOTAL**		

ANNUAL EXPENDITIURES (REFER TO PERSONAL INCOME TAX RETURNS FOR PREVIOUS YEAR)			ANNUAL EXPENDITIURES (REFER TO PERSONAL 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 AND OTHER NOTES		
OTHER INCOME (DESCRIBE)			INSURANCE PREMIUMS		
			ESTIMATED LIVING EXPENSES		
			OTHER		
TOTAL INCOME			**TOTAL EXPENDITURES**		

LIFE INSURANCE	FACE AMOUNT	BENEFICIARY	COMPANY

Give details of any contingent liability as endorser or guarantor, or on suits or judgments pending. (If necessary, use separate sheet)
Do you do business with any other bank? _____ (If so, give details)
If you are married, are any of the assets described in this statement your wife's (husband's) separate property? _____ (If so, state which.)
HAVE YOUR INCOME TAX RETURNS EVER BEEN QUESTINED BY ANY GOVERNMENTAL AUTHORITY? _____ (If so, most recent year.)
HAVE YOU EVER GONE THROUGH BANKRUPCY? _____ HAVE YOU EVER MADE A WILL? _____ HAVE YOU FILED HOMESTEAD? _____

SCHEDULE 1: LISTED AND UNLISTED STOCKS AND BONDS Are any of the below Securities pledged? _____

NUMBER OF SHARES OR PAY VALUE	WHERE LISTED	DESCRIPTION	ISSUED IN THE NAME OF	MARKET VALUE
LISTED				
			TOTAL LISTED	
UNLISTED				
			TOTAL UNLISTED	

SCHEDULE 2: REAL ESTATE OWNED (Indicate I – Improved U – Unimproved)

STREET ADDRESS AND TYPE OF IMPROVEMENT	TITLE IN NAME OF	% OWNED	COST	PRESENT VALUE	TRUST DEEDS MORTGAGES OR OTHER LIENS			
					Unpaid Balance	Rate %	Monthly Payment	Held By
		TOTAL						

SCHEDULE 3: TRUST DEEDS AND MORTGAGE OWNED

NAME OF PAYOR	STREET ADDRESS AND TYPE OF IMPROVEMENT	ORIGINAL AMOUNT	UNPAID BALANCE	% OWNED	MONTHLY PAYMENT	1ST OR 2ND LIEN	VALUE OF PROPERTY
		TOTAL					

SCHEDULE 4: DETAILS RELATIVE TO OTHER IMPORTANT ASSETS AND LIABILITIES

The Undersigned declares that the above statement (or in lieu thereof the attached statement, as the case may be) and supporting schedules, both printed and written are a full, true and correct statement of the financial condition of the Undersigned as of the date indicated.

Social Security Number _____ Signature _____

Social Security Number _____ Signature _____