



ASSETS		LIABILITES	
Cash on hand and in Banks (Schedule 1)	\$	Notes Payable to Banks (Schedule 5)	\$
Cash Value of Life Insurance (Schedule 2)		Loans on Cash Value of Life Ins. (Schedule 2)	
Stocks and Bonds – at market (Schedule 3)		Notes Payable to Others (Schedule 5)	
Real Estate – at market (Schedule 4)		Mortgages Payable (Schedule 4)	
Autos and Trucks		Charge Accounts and Bills Payable (Schedule 6)	
Accounts or Notes Receivable		Other Liabilities (Itemize)	
Other Assets (Itemize)			
		Total Liabilities	
		Net Worth (Total Assets Minus Total Liabilities)	
Total Assets	\$	Total Liabilities and Net Worth	\$

INCOME INFORMATION			PERSONAL INFORMATION		
	Person 1	Person 2		Person 1	Person 2
Gross Salary – Annual	\$	\$	Date of Birth		
Bonus			Social Security Number		
Rental Income			Have you ever been bankrupt?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Dividend or Investment Income			Are you a defendant in any legal action?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other income (income from alimony, child support or separate maintenance need not be revealed if you do not choose to rely upon such income in applying for credit.)			Do you endorse, guaranty, or co-sign any loan not listed above? (Schedule 7)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			Are you under indictment, on probation or parole or ever been convicted for a criminal offense?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Total Income	\$	\$	Are any of your taxes past due?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Attach additional schedules if necessary

Schedule 1 CASH ON HANDS & IN BANKS				
Name of Bank	Type of Account	Maturity (if any)	Assigned to (if any)	Amount
				\$
<b>Total \$</b>				

Schedule 2 CASH VALUE OF LIFE INSURANCE					
Face Amount	Name of Insurance Company	Beneficiary	Loans on Cash Value of Life Insurance	Assigned to (if any)	Cash Value
\$			\$		\$
<b>Total \$</b>			<b>Total \$</b>		

<b>Schedule 3</b>					<b>STOCKS &amp; BONDS</b>				
No. of Shares	Description	Owner(s) of Record	Assigned to (if any)	Market Value					
				\$					
				<b>Total \$</b>					

<b>Schedule 4</b>								<b>REAL ESTATE</b>							
Location and Property Use	Owner(s) of Record	Year Acquired	Cost	Mortgage Balance	Held By	Monthly Payment	Market Value								
			\$	\$		\$	\$								
				<b>Total \$</b>									<b>Total \$</b>		

<b>Schedule 5</b>							<b>NOTES PAYABLE TO BANKS &amp; OTHERS</b>						
Name of Creditor	Type of Note	Monthly Payment	Maturity	Secured By	Endorsed or Guaranteed by	Present Balance							
		\$				\$							
				<b>Total \$</b>									

<b>Schedule 6</b>					<b>CHARGE ACCOUNTS &amp; BILLS PAYABLE (list only amounts over \$500)</b>				
Owed to	Type of Account	Monthly Payment	Secured by	Present Balance					
		\$		\$					

<b>Schedule 7</b>					<b>LOANS ENDORSED, GUARANTEED OR CO-SIGNED</b>				
Name of Borrower	Type of Loan	How obligated (endorser guarantor or co-signer)	Secured by	Present Balance					
				\$					
				\$					