

**FINANCIAL STATEMENT**  
 Personal Form  
 (DO NOT USE FOR BUSINESS)



<b>NAME</b>			<b>TELEPHONE</b>		
<b>RESIDENCE ADDRESS</b>			<b>CITY, STATE, ZIP</b>		<b>S.S. NUMBER</b>
<b>EMPLOYER NAME &amp; ADDRESS</b>			<b>POSITION HELD</b>		<b>BUSINESS PHONE</b>
<b>SPOUSE NAME</b>			<b>SPOUSE S.S. NUMBER</b>		<b>STATEMENT DATE</b>
<b>ASSETS</b>			<b>LIABILITIES</b>		
CASH			NOTES PAYABLE TO BANKS (4)		
ACCOUNTS RECEIVABLE			NOTES PAYABLE TO OTHERS (4)		
NOTES/MORTGAGES RECEIVABLE (1)			CURRENT BILLS PAYABLE		
STOCKS & BONDS (2)			INCOME & OTHER TAXES PAYABLE		
<b>TOTAL CURRENT ASSETS</b>			<b>TOTAL CURRENT LIABILITIES</b>		
REAL ESTATE & BUILDINGS (3)			LOANS ON LIFE INSURANCE (5)		
AUTOMOBILES, ETC., MARKET VALUES (DESCRIBE)			OTHER LONG TERM OBLIGATIONS (4)		
HOUSEHOLD GOODS & OTHER PERSONAL PROPERTY					
OTHER SECURITIES (2)					
CASH VALUE OF LIFE INSURANCE (5)					
LONG TERM RECEIVABLES (1)					
OTHER					
			<b>TOTAL LIABILITIES</b>		
<b>TOTAL ASSETS</b>			<b>NET WORTH</b>		
			<b>TOTAL LIAB. &amp; NET WORTH</b>		
<b>GROSS INCOME</b>	<b>MONTHLY</b>	<b>ANNUALLY</b>	<b>FIXED EXPENSES</b>	<b>MONTHLY</b>	<b>ANNUALLY</b>
SALARY			INSURANCE PREMIUMS		
SPOUSE'S SALARY			RENTAL		
INCOME FROM SECURITIES			MORTGAGE PYMTS.		
RENTAL OR LEASE INCOME			INCOME & OTHER TAXES		
MORTGAGES OR CONTRACT INCOME			OTHER INSTALLMENT PYMTS.		
OTHER INCOME			TOTAL FIXED EXPENSE		
TOTAL GROSS INCOME					

SCHEDULE 1 - NOTES, CONTRACTS & MORTGAGES RECEIVABLE						
DUE FROM	AMOUNT DUE		DATE OF MATURITY	AMOUNT RECEIVED		TYPE AND COLLATERAL
	IN 1 YEAR	AFTER 1 YEAR		MONTHLY	ANNUALLY	
<b>TOTALS</b>						

SCHEDULE 2- STOCKS & BONDS (ATTACH SEPARATE SHEET IF NECESSARY)							
# OF SHARES	DESCRIPTION	SECURITY IN NAME OF	MARKET PRICE	CURRENT LISTED/	MARKET UNLISTED	BOND INFO INT RATE/MAT	ANNUAL INT. RATE
<b>TOTALS</b>							

SCHEDULE 3 - REAL ESTATE & BUILDINGS							
LOCATION	DESCRIPTION	TITLE IN NAME OF	COST OF LAND	COST OF IMPROVE.	TOTAL	DEBT (4)	INCOME
<b>TOTALS</b>							

SCHEDULE 4 - NOTES, CONTRACTS & MORTGAGES PAYABLE (INCL. REAL ESTATE)						
DUE TO	AMOUNT DUE		DATE OF MATURITY	AMOUNT OF PAYMENT		TYPE AND COLLATERAL
	IN 1 YEAR	AFTER 1 YEAR		MONTHLY	ANNUALLY	
<b>TOTALS</b>						

SCHEDULE 5. LIFE INSURANCE					
NAME OF COMPANY	BENEFICIARY	FACE AMOUNT	CASH VALUE	AMT. OF LOAN	DUE TO
<b>TOTALS</b>					

**AUTO INSURANCE**  
 PUBLIC LIABILITY: \$ \_\_\_\_\_ PROPERTY DAMAGE \$ \_\_\_\_\_ **HEALTH/ACCIDENT/DISABILITY** YES \_\_\_ NO \_\_\_  
 HAVE YOU ANY LIABILITY AS GUARANTOR OR ENDORSER? YES \_\_\_ NO \_\_\_ IF SO, GIVE DETAILS \_\_\_\_\_

\_\_\_\_\_  
 HAVE YOU EVER DECLARED BANKRUPTCY? YES \_\_\_ NO \_\_\_ IF SO, GIVE DATE \_\_\_\_\_

ARE YOU MARRIED? YES \_\_\_ NO \_\_\_ IF SO, ARE ANY OF THE ABOVE ASSETS YOUR SPOUSE'S? YES \_\_\_ NO \_\_\_  
 SEPARATE PROPERTY? YES \_\_\_ NO \_\_\_ DESCRIBE \_\_\_\_\_

ARE THERE ANY SUITS, JUDGMENTS, TAX DEFICIENCIES, OR OTHER CLAIMS PENDING AGAINST YOU? YES \_\_\_ NO \_\_\_  
 GIVE DETAILS \_\_\_\_\_

HAVE YOU MADE A WILL? YES \_\_\_ NO \_\_\_ IF SO, WHO IS NAMED EXECUTOR OF ESTATE? \_\_\_\_\_

\_\_\_\_\_  
 SIGNATURE

\_\_\_\_\_  
 DATE