

FINANCIAL STATEMENT

(Must be completed by each individual; joint holdings must be so noted.)

Please provide supporting documents for assets listed.

"ALL INFORMATION WILL BE HELD CONFIDENTIAL"

ASSETS		NAMES:				
	1st Person	Is the asset security for a loan?		2nd Person	Is the asset security for a loan?	
		Yes	No		Yes	No
Cash (Savings & Checking)	\$			\$		
CD's, Money Markets, etc.	\$			\$		
Stocks & Bonds	\$			\$		
IRA's, Annuities, etc.	\$			\$		
House	\$			\$		
Other Real Estate	\$			\$		
Trust Fund (indicate % beneficial int.)	\$			\$		
Cash Surrender Value of Life Insurance	\$			\$		
Other Assets (Describe Below):	\$			\$		
TOTAL ASSETS:	\$			\$		

LIABILITIES		
	1st Person	2nd Person
Mortgage on Residence	\$	\$
Mortgage(s) on Other Real Estate	\$	\$
Other Bank Loans	\$	\$
Loans Against Cash Surrender Value of Life Insurance	\$	\$
Other Liabilities (Notes Payable, etc.)	\$	\$
TOTAL LIABILITIES:	\$	\$

HAVE YOU GUARANTEED ANY DEBT OWED BY ANOTHER?

_____ YES

_____ NO

Guarantor(s)	Debtor	Relation	Amount of Debt Guaranteed

REGULAR MONTHLY INCOME

	1st Person	2nd Person
Social Security	\$	\$
Pension ⁽¹⁾	\$	\$
Dividends	\$	\$
Interest	\$	\$
Mortgage/Rental Income	\$	\$
IRA Income	\$	\$
Trust Income	\$	\$
Other Monthly Income	\$	\$
Total Regular Monthly Income		

- (1) With regard to monthly pension income reflected, will the monthly payment continue in the same amount for the life of the other person listed (generally, the surviving spouse)? _____ Yes _____ No
If no, what will the monthly payment be after the death of the recipient listed? _____/month.

I hereby declare that all statements made herein are true according to my best knowledge and belief.

In witness whereof, I have hereunto set my hand to this application this _____ day of _____,
_____.

Signature of 1st Person

Signature of 2nd Person

Print Name of 1st Person

Print Name of 2nd Person