

as of _____, 20 ____.

FINANCIAL STATEMENT (IF JOINT STATEMENT SPOUSE MUST SIGN)

NAME				BIRTHDATE	SOCIAL SECURITY NO.	DRIVERS LICENSE NO.	OCCUPATION/POSITION	
SPOUSE'S NAME				BIRTHDATE	SOCIAL SECURITY NO.	DRIVERS LICENSE NO.	OCCUPATION/POSITION	
HOME ADDRESS	CITY	STATE	ZIP	HOW LONG	PHONE	EMPLOYER	HOW LONG	
BUSINESS ADDRESS	CITY	STATE	ZIP	HOW LONG	PHONE	SPOUSE EMPLOYER	HOW LONG	

SECTION A: ASSETS

CASH (Schedule 1)	
MARKETABLE SECURITIES (Schedule 2)	
NON-MARKETABLE SECURITIES (Schedule 3)	
NET CASH VALUE LIFE INSURANCE (Schedule 4)	
INVESTMENT IN PARTNERSHIP (Schedule 5)	
REAL ESTATE (Schedule 6)	
IRA's, KEOGH's, 401k's, OTHER (Schedule 7)	
OIL & GAS INTERESTS (Schedule 8)	
NOTES RECEIVABLE (Schedule 9)	
OTHER ASSETS	
Personal Property	
Automobiles	
Interests in Trusts	
Misc:	
TOTAL ASSETS	

SECTION B: LIABILITIES

REAL ESTATE/MORTGAGES PAYABLE (Schedule 6)	
NOTES PAYABLE (Schedule 10)	
MARGIN DEBT DUE BROKERS (Schedule 2)	
NON-MARKETABLE SECURITIES DEBT (Schedule 3)	
PARTNERSHIP, RELATED DEBT (Schedule 5)	
OIL & GAS RELATED DEBT (Schedule 8)	
TAXES PAYABLE (Schedule 11)	
CREDIT CARD DEBT	
OTHER LIABILITIES	
TOTAL LIABILITIES	
NET WORTH (Total Assets Less Total Liabilities)	
CONTINGENT LIABILITIES (Schedule 12)	

SECTION C: CASH INCOME AND CASH EXPENSE INFORMATION*

CASH INCOME**

	THIS YEAR 20 ____
GROSS WAGES OR SALARIES	
COMMISSIONS, BONUSSES, ETC.	
PARTNERSHIP DRAWS, ETC.	
PARTNERSHIP DISTRIBUTIONS (Schedule 5)	
DIVIDENDS (MARKETABLE SECURITIES) (Schedule 2)	
DIVIDENDS (NON-MARKETABLE SECURITIES) (Schedule 3)	
GROSS RENTAL INCOME (Schedule 6)	
OIL & GAS INCOME (Schedule 8)	
NOTES RECEIVABLE INCOME (Schedule 9)	
INTEREST INCOME	
OTHER	
TOTAL CASH INCOME	

CASH EXPENSES

	THIS YEAR 20 ____
REAL ESTATE/MORTGAGES PAYMENTS (Schedule 6)	
NOTES PAYABLE PAYMENTS (Schedule 10)	
PARTNERSHIP CONTRIBUTIONS (Schedule 5)	
TAXES & INSURANCE (REAL ESTATE) (Schedule 6)	
OTHER EXPENSES (REAL ESTATE) (Schedule 6)	
OIL & GAS DEBT PAYMENTS (Schedule 8)	
OIL & GAS EXPENSES (Schedule 8)	
ANNUAL INCOME TAXES	
RENT (If no mtg payment)	
LIVING EXPENSES & MISC.	
ALIMONY, TUITION, ETC.	
INSURANCE PAYMENTS	
OTHER:	
TOTAL CASH EXPENSES	
NET CASH FLOW (Cash Income Less Cash Expenses)	

*List all assumptions on page 4 under Additional Comments and describe any significant expected changes in your cash income or your cash expenses.
**Income from alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

In the following statement, the words "I", "me", and "my" mean anyone signing below. "You" and "your" refer to Bank.

I have given you this financial statement and attachments, if any, in order to obtain credit or services from you. I understand that you will rely on this information in connection with any decision you make in providing credit or services to me. I warrant and represent to you that this financial statement and any other information I supply to you is correct and fully and accurately discloses all of my assets and liabilities, including, but not limited to, my contingent liabilities, cash income, and cash expenses as of the date I provide this information to you. All appraisals and similar indications of value relating to my assets which are available to me as of this date are available upon request for your review. You may assume that my financial condition is at least as good as shown on this statement until I provide you an updated financial statement. You may request credit information about me from others including an investigative consumer report and you may request a consumer credit report about me in connection with this statement for credit or services. If I ask you, you will tell me whether or not a consumer credit report was requested and will also tell me the name and address of the reporting agency. I give you permission to obtain additional consumer credit reports and investigative consumer reports without telling me should you update, renew, extend, or review my credit or other service arrangements with you. You may also share credit information about me with your affiliates, subsidiaries, parent company, other creditors, and all others permitted or required by law. In the event any information contained in this statement is incorrect, false, or misleading and you incur a loss, I understand that you may file a Criminal Referral Form as requested or required by your supervisory agency. I also understand that knowingly providing false or misleading information in this financial statement is a federal offense that may subject me to fine, imprisonment or both (18 USC Section 1014).

ATTENTION: CONTINGENT OBLIGATIONS (SCHEDULE 12) MUST BE COMPLETED. IF NONE, THEN WRITE NONE ON THE SCHEDULE.

SIGNATURE	Date	SPOUSE SIGNATURE	Date
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SCHEDULE 1 - CASH

(attach copy of most recent supporting statement if available)

1	ACCOUNT NAME	BANK/BRANCH NAME & ADDRESS	BALANCE	ACCOUNT TYPE/NUMBER	PLEGDED Y or N?

SCHEDULE 2 - MARKETABLE SECURITIES (Stocks, Bonds, Govt Issues, Mutual Funds, etc.)

(attach copy of most recent supporting statement if available)

2	DESCRIPTION OF SECURITIES	# OF SHARES	NAME ON ACCOUNT	COST / FACE VALUE	CURRENT MARKET VALUE	MARGIN DEBT	YRLY DIVIDEND INCOME	PLEGDED Y or N?
NAME OF BROKERAGE FIRM/BROKER			PHONE #					

SCHEDULE 3 - NON-MARKETABLE SECURITIES

3	DESCRIPTION OF SECURITIES	# OF SHARES	NAME ON ACCOUNT	COST/FACE VALUE	CURRENT MARKET VALUE	ASSOCIATED DEBT	YRLY DIVIDEND INCOME	PLEGDED Y or N?

SCHEDULE 4 - LIFE INSURANCE

4	COMPANY	FACE AMOUNT	CASH SURRENDER VALUE	POLICY LOAN (IF ANY)	NET CASH VALUE	BENEFICIARY	IS POLICY OR C/V ASSIGNED?

SCHEDULE 5 - INVESTMENTS IN PARTNERSHIPS

Instructions: Market value and related debt should be based on percent of ownership.

5	PARTNERSHIP NAME	GENERAL, LTD, OTHER	% OWNED	COST	CURRENT MARKET VALUE	PARTNERSHIP RELATED DEBT		YEARLY CONTRIB.	YEARLY DISTRIB.
						BALANCE	YRLY P&I		

SCHEDULE 6 - REAL ESTATE

Instructions: Balances and related income and expense should be based on percent of ownership.

6	ADDRESS (Homestead first)	% OWNED	COST / DATE ACQUIRED	MARKET VALUE	RELATED DEBT			YEARLY GROSS INCOME	YEARLY TAXES & INS	YEARLY OTHER EXPENSES
					CURR. BAL.	LIEN HOLDER	YRLY P&I			

SCHEDULE 7 - IRA's, KEOGH's, 401k's, OTHER

7	TYPE	NAME ON ACCOUNT	% VESTED	CURRENT BALANCE	LOANS	NET VALUE

SCHEDULE 8 - OIL AND GAS INTERESTS

8	TYPE OF INTEREST	% OWNED	VALUATION	RELATED DEBT			YEARLY INCOME	YEARLY EXPENSES
				BALANCE	LIENHOLDER	YEARLY P&I		

SCHEDULE 9 - NOTES RECEIVABLE

9	NAME & ADDRESS OF MAKER	PURPOSE	ORIG. DATE	ORIG. AMT	BALANCE	MATURITY	YRLY INCOME	COLLATERAL

SCHEDULE 10 - NOTES PAYABLE

(excludes mortgage, partnership, real estate, and oil & gas related debt)

10	NAME & ADDRESS OF FINANCIAL INSTITUTION	PURPOSE	ORIGINAL DATE	ORIGINAL AMOUNT	BALANCE	MATURITY	YEARLY P&I	COLLATERAL

SCHEDULE 11 - TAXES PAYABLE

11	OBLIGOR	AMT TAXES OWED	TYPE OF TAXES	PERIOD(S) DUE FOR	TAXING AUTHORITY

SCHEDULE 12 - CONTINGENT LIABILITIES

Instructions: State total amount by type of liability and describe.

12		COMMENTS:
A.	AS GUARANTOR OR ENDORSER	
B.	ON LEASES OR CONTRACTS	
C.	FOR LEGAL CLAIMS OR JUDGEMENTS	
D.	INCOME TAX CLAIM OR DISPUTE	
E.	LETTERS OF CREDIT	
F.	FUTURE CAPITAL CONTRIBUTIONS	
G.	OTHER CONTINGENT LIABILITIES	
TOTAL CONTINGENT LIABILITIES		

Instructions: List each contingent liability below.

DESCRIBE (A-G ABOVE)	BENEFICIARY PARTY	TOTAL DEBT	AMT OBLIGATED	PURPOSE / EXPLANATION	MATURITY

Instructions: List all collateral pledged on contingent liabilities.

COLLATERAL DESCRIPTION	ADDRESS	CURRENT VALUE	TITLE HOLDER NAME

