

**Financial Statement / Cash Flow Statement
(For Individuals Only) As Of _____, 20_____**

*The First
National Bank*

Name		Home Address		
Name of Employer		Home Tel. No.	Date of Birth	# Dependents
Position Held	Tenure	Driver's License No./State	Spouse's Name	Spouse's Social Sec. No.
Business Address		Business Tel. No.	Social Security Number	

The Financial Statement, Cash Flow Statement and supporting schedules, which are submitted herein for the purpose of establishing, obtaining and maintaining credit, present a true, complete and correct statement of my financial condition as of the dates shown above. I understand that the penalties for misrepresenting information on this Financial Statement can be a fine of not more than \$5,000, imprisonment of not more than two years, or both under Title 18, Section 1014 of the U.S. Code. I agree to notify the bank of any material adverse change in my financial condition and to furnish current financial information upon request by the bank from time to time.

First National Bank is authorized to contact any appropriate third parties for the purpose of verifying any stated information herein and obtaining credit information at any time from any of my creditors and/or credit reporting agencies. Such Financial Statement and other information furnished shall be the property of the bank.

Witnessed By	Signature	Date
Prepared By (If Other Than Maker)	Signature	Date

Assets		(Omit Cents)	Liabilities		(Omit Cents)
Cash (Schedule 1)	In This Bank		Notes Payable To This Bank (Schedule 6)	Unsecured	
	In Other Banks			Secured	
Securities (Schedule 2)	Marketable (Publicly Traded)		Notes Payable To Other Banks (Schedule 6)	Unsecured	
	Non-Marketable (Private)			Secured	
	Restricted or Control Stock		Other Notes or Accounts Payable (Schedule 6)		
Notes And Accounts Receivable (Schedule 3)			Mortgages Payable (Schedule 7)	Homestead	
Net Cash Value of Life Insurance (Schedule 5)				Other Real Estate	
Real Estate (Schedule 7)	Homestead		Due On Automobiles (Schedule 6)		
	Other Real Estate		Due To Brokers		
			Taxes Owning	Income Taxes	
				Property or Other Taxes	
Automobiles			Other Liabilities (Itemize)		
IRA/Retirement Accts and Profit Sharing Funds (Schedule 1)					
Oil, Gas, and Mineral Interests (Schedule 4)					
Other Assets (Itemize)					
			Total Liabilities		
			Net Worth (Assets - Liabilities)		
Total Assets			Total Liabilities And Net Worth		

Contingent Liabilities **

	Purpose:	To Whom:	Amount:	Maturity or Expiration Date
As Endorser or Co-Maker	_____	_____	\$ _____	_____
As Guarantor	_____	_____	_____	_____
On Leases or Contracts	_____	_____	_____	_____
Legal Claims or Judgments	_____	_____	_____	_____
Other Obligations or Special Expenses (alimony, child support, etc.)	_____	_____	_____	_____
Total Contingent Liabilities	_____	_____	\$ _____	_____

Comments: _____

Personal Assets Pledged Against Other Borrower's Debt: _____

Schedule No. 1: Cash And IRA/Retirement Accounts

Account Style	Financial Institution	Account Number	Type Of Account	Balance	Pledged	
					Yes	No

Schedule No. 2: Stocks And Bonds Owned

No./Shares Face Value (Bonds)	Name Of Issuing Company	Market Per Share	Total Market Value	Where Traded	Registered Name	Restricted		Pledged	
						Yes	No	Yes	No

Schedule No. 3: Notes And Accounts Receivable

Due From	Original Loan Amount	Date Extended	Balance Owing	Rate	Payments/ Frequency	Maturity	Collateral	Pledged	
								Yes	No

Schedule No. 4: Oil, Gas, And Mineral Interests

Location And Description	Working Interest	Fractional Royalty Interest	Monthly Income	Valuation	Date Of Valuation	Source Of Valuation	Pledged	
							Yes	No

Schedule No. 5: Life Insurance

Insured	Company	Face Amount	Cash Surrender or Loan Value	Loan On Policy	Beneficiary	Pledged	
						Yes	No

Schedule No. 6: Notes And Accounts Payable (Including Credit Cards, If Any)

Due To	Original Note Amount	Date Extended	Balance Owing	Rate	Payments/ Frequency	Maturity	Collateral	Current	
								Yes	No

Schedule 7 - Real Estate Owned

Description, Location and Size	Cost	Date & Source of Appraisal (Ex: MAI, Tax Assessment, Self)	Total Project		Ownership		Lienholder	Maturity	Annual Income
			Appraised Value	Debt Balance	Pro. Rate Value	Pro. Rate Liability*			
Homestead:									

Other Real Estate (Description, Location and Size):

A.									
B.									
C.									
D.									
E.									

*If Your Liability Exceeds Your Ownership %, Please Indicate Amount In Contingent Liability Which, If Any, Of The Above Properties Is Used For Business Purposes:
 Section On Page 1. If any debt is non-recourse, please explain:

Businesses In Which I Am A Partner, Officer, Principal Owner, Etc.

I understand that the following questions 1 through 7 are addressed to me and I have answered them appropriately.

- Yes No 1. Are any of the Assets held in trust, in an estate or in any other name?
- Yes No 2. Have you been the beneficiary of any debt forgiveness?
- Yes No 3. Are you a party to any suit or are there any unsatisfied judgements against you?
- Yes No 4. Have you been through bankruptcy or made an assignment for benefit of creditors?
- Yes No 5. Have you ever compromised a debt?
- Yes No 6. Are you presently in default on any debt?
- Yes No 7. Have you ever been convicted of a felony?

I have explained fully on page 4 any "Yes" answers to the foregoing questions 1 through 7.

Have Have Not Made a will, the executor is _____

CASH FLOW STATEMENT

Please provide the following information regarding sources and uses of cash during the calendar year and your projections for the current year. If a cash flow deficit exists, explain how the existing or requested debt will be serviced.

Individual () Joint ()	Prior Year 20_____	Prior Year 20_____	Projected Next Year 20_____
Sources Of Cash			
<small>Alimony, child support, or separate maintenance need not be revealed unless you wish to have them considered as a basis for repaying the credit requested.</small>			
Salaries (Gross)	\$ _____	\$ _____	\$ _____
Commissions	_____	_____	_____
Bonuses	_____	_____	_____
Interest Income	_____	_____	_____
Rents Received	_____	_____	_____
Dividends	_____	_____	_____
Sale Of Assets (Detail Below)	_____	_____	_____
Liquidation Of Receivables	_____	_____	_____
Royalties	_____	_____	_____
Distributions From Production Income	_____	_____	_____
Alimony, Child Support, Or Separate Maintenance	_____	_____	_____
Estates & Trusts	_____	_____	_____
Cash Distributions From Business, Partnerships or Joint Ventures	_____	_____	_____
Income Tax Refund	_____	_____	_____
Other Sources Of Cash (Detail Below)	_____	_____	_____
Total Cash Received	\$ _____	\$ _____	\$ _____
Uses Of Cash			
Personal Expenses (Utilities, Rent Household, etc.)	\$ _____	\$ _____	\$ _____
Bank Loans – Principal & Interest (Detail Below)	_____	_____	_____
Other Loans – Principal & Interest (Detail Below)	_____	_____	_____
Alimony, Child Support Or Separate Maintenance	_____	_____	_____
Insurance Payments	_____	_____	_____
Income Taxes (Includes FICA, Withholding, and State)	_____	_____	_____
Property Taxes	_____	_____	_____
Business Requirements (Partnership Contributions, Capitalizations, etc.)	_____	_____	_____
Other Uses Of Cash (Detail Below)	_____	_____	_____
Total Cash Outlays	\$ _____	\$ _____	\$ _____
Cash Flow Surplus (Deficit)	\$ _____	\$ _____	\$ _____

Additional Comments: _____

