

PERSONAL FINANCIAL STATEMENT

as of _____

NAME	SOCIAL SECURITY NO.	EMPLOYER	HOW LONG
HOME ADDRESS	PHONE	HOW LONG	OCCUPATION / POSITION
BUSINESS ADDRESS	PHONE	SPOUSE'S NAME	NO. OF DEP.

SECTION A: ASSETS

CASH (Schedule 1)	
MARKETABLE SECURITIES (Schedule 2)	
NON-MARKETABLE SECURITIES (Schedule 3)	
INVESTMENTS IN PARTNERSHIPS (Schedule 4)	
REAL ESTATE (HOMESTEAD) (Schedule 5)	
REAL ESTATE (OTHER) (Schedule 5)	
IRA'S & RETIREMENT PLANS (Schedule 6)	
OIL & GAS INTERESTS (Schedule 7)	
OTHER ASSETS	
Personal Property	
Automobiles	
Notes Receivable	
Interests in Trusts	
Misc.	
TOTAL ASSETS	

SECTION B: LIABILITIES

REAL ESTATE / MORT. PAYABLE (Schedule 5)	
NOTES PAYABLE (Schedule 8)	
MARGIN DEBT DUE BROKERS (Schedule 2)	
PARTNERSHIP RELATED DEBT (Schedule 4)	
OIL & GAS RELATED DEBT (Schedule 7)	
TAXES PAYABLE	
CREDIT CARD DEBT	
OTHER LIABILITIES	
Misc.	
TOTAL LIABILITIES	
NET WORTH (Assets less Liabilities)	
TOTAL LIABILITIES & NET WORTH	

SECTION C: CASH INCOME AND CASH EXPENSE INFORMATION

	THIS YEAR		THIS YEAR
CASH INCOME*		CASH EXPENSE**	
GROSS WAGES OR SALARIES		REAL ESTATE / MORTGAGE PAYMENTS	
COMMISSIONS, BONUSSES, ETC.		REGULARLY SCHEDULED PAYMENTS	
PARTNERSHIP DRAWS, ETC.		INCOME TAXES	
PARTNERSHIP DISTRIBUTIONS		PARTNERSHIP CONTRIBUTIONS	
INTEREST & DIVIDENDS		OTHER TAXES (REAL ESTATE, ETC.)	
RENTAL INCOME		LIVING EXPENSES & MISC.	
OIL & GAS INCOME		RENTAL EXPENSES	
OTHER		OIL & GAS EXPENSES	
		OTHER ANTICIPATED PAYMENTS	
		OTHER	
TOTAL CASH INCOME		TOTAL CASH EXPENSE	
		NET CASH FLOW	

*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.
 **List all assumptions on page 4 under Additional comments and describe any significant expected changes in your cash income or your cash expense.

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 may 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 attached for your review. You may assume that my financial condition is at least as good as shown on this statement until I provide you another 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 my 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. I understand that, in the event any information contained in the statement is incorrect, false, or misleading and you incur a loss, you may file a Criminal Referral Form as may be requested or required by your supervisory agency. I also understand that knowingly providing false or misleading information in the financial statement is a federal offense that may subject me to fine, imprisonment or both (18 USC Section 1014).

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

SIGNATURE	DATE	SIGNATURE	DATE
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SCHEDULE 1 - CASH

ACCOUNT NAME	BANK NAME & ADDRESS	BALANCE	TYPE / NUMBER	PLEDGED?

SCHEDULE 2 - MARKETABLE SECURITIES (Stocks, Bonds, Gov't Issues, Mutual Funds, etc.)

DESCRIPTION OF SECURITIES	FACE OR # SHARES	MARKET VALUE	PLEDGED?	MARGIN DEBT	YEARLY INCOME
NAME OF BROKERAGE FIRM/BROKER					

SCHEDULE 3 - NON-MARKETABLE SECURITIES

DESCRIPTION OF SECURITIES	FACE OR # SHARES	MARKET VALUE	PLEDGED?	DEBT	Cost

SCHEDULE 4 - INVESTMENTS IN PARTNERSHIPS

PARTNERSHIP NAME	GENERAL / LIMITED	PERCENT OWNED	COST	MARKET VALUE	DEBT	ANNUAL PAYMENTS	ANNUAL DIST.	ANNUAL CONTRIB.

SCHEDULE 5 - REAL ESTATE

LOCATION	PERCENT OWNED	COST	MARKET VALUE	DEBT	LIENHLDR	ANNUAL PAYMENTS	ANNUAL INCOME	ANNUAL EXPENSE

SCHEDULE 6 - IRA'S & RETIREMENT PLANS

TYPE	% VESTED	BALANCE	DEBT	NET VALUE

SCHEDULE 7 - OIL & GAS INTERESTS

TYPE OF INTEREST	PERCENT OWNED	VALUE	DEBT	LIENHLDR	ANNUAL PAYMENTS	ANNUAL INCOME	ANNUAL EXPENSE

SCHEDULE 8 - NOTES PAYABLE

FIN. INSTITUTION	PURPOSE	ORIGINAL DATE	ORIGINAL BALANCE	CURRENT BALANCE	MATURITY	ANNUAL PAYMENTS	COLLATERAL

SCHEDULE 9 - CONTINGENT OBLIGATIONS

Instructions: State Total Amount By Type of Liability and Describe

A) AS GUARANTOR OR ENDORSER	E) LETTERS OF CREDIT
B) ON LEASES OR CONTRACTS	F) FUTURE CAPITAL CONTRIBUTIONS
C) FOR LEGAL CLAIMS OR JUDGEMENTS	G)
D) INCOME TAX CLAIM OR DISPUTE	TOTAL OF A) THROUGH G)

DESCRIBE A) THROUGH G) ABOVE	BENEFICIARY PARTY	AMOUNT OBLIGATD	DATE OBLIGATD	PURPOSE OR EXPLANATION	MATURITY

SCHEDULE 10 - INSURANCE

AUTO	HOME / REAL ESTATE	LIFE
INSURANCE CO.	INSURANCE CO.	INSURANCE CO.
POLICY NO.	POLICY NO.	POLICY NO.
COVERAGE	COVERAGE	COVERAGE
		FACE VALUE
		CASH VALUE
AGENT NAME	AGENT NAME	AGENT NAME
PHONE #	PHONE #	PHONE #

NAME OF PERSONAL ATTORNEY: _____

1) Are you a defendant in any suits or legal actions? No Yes If yes, describe on attached page.

2) Income tax returns filed through (date) _____. Are any returns being audited or contested? No Yes, If yes, what year(s)? _____.

3) Have you drawn a will? No Yes, If yes, year drawn _____, Executor/trix _____.

4) Do you have a line of credit or unused line of credit at any other institution? No Yes, If yes, indicate how much _____.

5) Have you every filed a petition in bankruptcy or has one been filed involuntarily against you? No Yes, If yes, describe on attached page.

6) Are you an Executive Officer, Director, or Principal Shareholder of a bank? No Yes, If yes, name of bank _____.