

	NAME (FIRST, MIDDLE, LAST)			SOCIAL SECURITY NUMBER
	HOME ADDRESS (NUMBER AND STREET)			HOME PHONE OR CELL
APPLICANT	CITY	STATE	ZIP CODE	DATE OF BIRTH
PLIC	BUSINESS NAME			OCCUPATION
A	BUSINESS ADDRESS (NUMBER AND STREET)			BUSINESS PHONE
	CITY	STATE	ZIP CODE	NO. OF DEPENDENTS
	NAME (FIRST, MIDDLE, LAST)			SOCIAL SECURITY NUMBER
ΑΝΤ	HOME ADDRESS (NUMBER AND STREET)			HOME PHONE OR CELL
APPLICANT	CITY	STATE	ZIP CODE	DATE OF BIRTH
	BUSINESS NAME			OCCUPATION
JOINT	BUSINESS ADDRESS (NUMBER AND STREET)			BUSINESS PHONE
>	CITY	STATE	ZIP CODE	NO. OF DEPENDENTS

# FINANCIAL STATEMENT OF CONDITION AS OF

ASSETS (OMIT CENTS)	LIABILITIES (OMIT CENTS)
CASH IN OUR BANK	NOTES PAYABLE - AUTOMOBILES (Schedule J)
CASH IN OTHER BANKS & SAVINGS AND LOANS	NOTES PAYABLE (Schedule K)
NOTES RECEIVABLE (Schedule A)	TAXES OWING:
OTHER ACCOUNTS RECEIVABLE:	INCOME TAXES
PROFESSIONAL ACCTS. REC.	OTHER TAXES
OTHER COLLECTIBLE AMOUNTS	OWING ON REAL ESTATE (Schedules E AND F)
STOCKS AND BONDS (TRADED) (Schedule B)	LIFE INSURANCE POLICY LOANS (Schedule D)
STOCKS AND BONDS (CLOSELY HELD) (Schedule C)	OTHER LIABILITIES (VISA, MC, Open Accounts)
CASH SURRENDER VALUE - LIFE INSURANCE (Schedule D)	
AUTOMOBILES	
REAL ESTATE (Schedules E & F)	
OIL INTERESTS (Schedule G)	
PRODUCING PROPERTIES	TOTAL LIABILITIES
OTHER OIL INTERESTS	TOTAL ASSETS
AND OFFICIANTS OF A COPETO	LESS: TOTAL LIABILITIES
MISCELLANEOUS ASSETS (Schedule H)	NET WORTH
	TOTAL LIABILITIES
TOTAL ASSETS	AND NET WORTH

INCOME IN THE YEAR	FORMATIC ENDING	ON FO	R		_	J	JOINT INC	COME		IDIVIDUAL II	NCOME		
SALARIES						if	limony, child support, or separate maintenance income need not be revealed you do not wish to have it considered as a basis for repaying this debt.						
COMMISSIO	ONS					го	THER (DES	CRIBE)					
DIVIDENDS									TOTAL ALI	INCOME			
TAX RETURN HAS BEE	EN FILED THRO	UGH (DA	TE)			AN	NY ADDITIO	NAL ASSESSMEN	TS?		I IF YES, AMOU	NT	
AMOUNT OF INCOME	TAXES PAID LA	ST YEAR	1								<u> </u>		
SCHEDULE A. N	OTES DUE	ME											
DUE I	FROM		ORIGINAL AMOL	JNT	BALANCE OWII	NG	PAYN	MENTS	MATI	JRITY	COLL	ATERAL	
			ТО	TAL									
SCHEDULE B. S	TOCKS AN	D BON											
NO. OF SHARES	FACE AMO (BOND	OUNT S)	ISSU	ING C	OMPANY		MKT. VALUE PER SHARE		MARKET VALUE		LEGIONED STOCK? YES/NO	WHERE TRADED	
					-\_								
				4									
				,	5		-{						
						4			7				
				e		É							
SCHEDIII E.C. S	TOCK (Part	norchi	ip Interests) - CLO	SELV	HELD			TOTAL					
NO. OF SHA	,	PE	ERCENT OF WNERSHIP	JELI	NAME OF COMP	PANY		ORIGINAL COST	PF	RESENT /ALUE	HOW	VALUE TERMINED	
			WINCINOTIII						<u> </u>	ALUL	WAGDE	TERMINED	
SCHEDIII E D. I	IEE INCLID	ANCE				TOTA	L						
INSURING			POLIC	Y	FACE	CASE	H VALUE	LOAN AGAIN		ASSIGNE	D <sub>BENE</sub>	FICIARY	
INSURING COMPANY NAME		NUMBI	=R	AMOUNT	0/101		JE IF YES, LIST AMOUNT		YES/NO	BENE			
	D A WILL DISF	OSING	OF YOUR ESTATE IN TH	E EVEN	IT OF YOUR DEATH?			IF YES, NAME OF EXECUTOR					
	NKRUPTCY W <b>NO</b>	ITHIN TH	IE LAST FIVE YEARS?					IF YES, WHEN	1?				

#### SCHEDULE E. REAL ESTATE [Supplemental Schedule Available]

INSTRUCTIONS: COMPLETE THE FOLLOWING SECTION COMPLETELY. DESIGNATE REAL ESTATE USE BY ONE OF THE FOLLOWING: H - RESIDENCE; I - INCOME PROPERTY; D - DEVELOPMENT PROPERTY (held for resale); INV. - INVESTMENT; A - AGRICULTURAL; R - RECREATIONAL.

R/E USE	DESCRIPTION AND LOCATION	ORIGINAL COST	PRESENT VALUE	MONTHLY INCOME	MORTGAGE PAYABLE TO	MORTGAGE AMOUNT	AMT. PER MONTH
		TOTAL					

#### SCHEDULE F. UNDIVIDED INTEREST IN REAL ESTATE [Supplemental Schedule Available]

R/E USE	DESCRIPTION AND LOCATION	% OWN.	ORIGINAL COST	PRESENT VALUE	MONTHLY INCOME	MORTGAGE PAYABLE TO	MORTGAGE AMOUNT	AMT. PER MONTH
					<b>B</b>			
			TOTAL		3			

### SCHEDULE G. OIL INTEREST - PRODUCING PROPERTIES [Supplemental Schedule Available]

DESCRIPTION (FIELD, COUNTY, STATE OPERATION OR ROYALTY INTERESTS)	FRACTIONAL INTEREST	NET MONTHLY INCOME	PRESENT VALUE	ENGINEERING BY WHOM
	TOTAL			

## SCHEDULE H. MISCELLANEOUS ASSETS (JEWELRY, GUNS, COLLECTIBLES, ETC.)

ITEM DISC RIP TI ON	NAME OF OWNER(S)	INSURED YES/NO	APPRAISED VALUE
		ΤΟΤΑΙ	

SCHEDULE I. CONTINGENT LIABII	LITIES							
	DUE TO	BALANCE OWI	NG	PAYMENT	S	MATURITY		COLLATERAL
ENDORSER OR COSIGNER?								
GUARANTOR								
LEASES OR CONTRACTS								
LEGAL CLAIMS OR JUDGEMENTS								
OTHER (DESCRIBE)*								
*ALIMONY, CHILD SUPPORT, ETC.	TOTAL							
DESCRIPTION OF VEHICL		ECREATIONAL VE	HICLES	PAID	LOAN	MON	ГНІ У	CURRENT
(MAKE, MODEL, YEAR, COLOR		NAME OF OWNER	R(S)	OFF YES/NO	AMOUN			VALUE
SCHEDULE K. NOTES PAYABLE			ī	OTAL				
DUE TO WHOM		AMOUNT	PAYABLE		MATURITY	SOURCE OF LIQUIDATION	COLLA	TERAL PLEDGED
		-//				LIQUIDATION		
			-	$\leftarrow$				
		<u> </u>						
	TOTAL							
	NAME OF BUSINESS		R, OFFICE	R, PRINCI	PAL OWNER	BANK OF A	CCOLINIT	
	NAME OF BOSINESS					BANK OF A	CCOONT	
This Financial Statement and correct representatio material change in the ab	ons of my financial c	edules are subn condition as of t	he stated	date. It is	se of obtai understoo	od that I will n	nd are tr otify this DATE	Bank of any

X