

PERSONAL FINANCIAL STATEMENT

Name(s) _____ Business _____
 Address _____ Phone: Home _____
 Phone: Business _____

For the purpose of procuring credit from time to time with you from my(our) negotiable paper or otherwise, I(we) furnish the following as a true, accurate and complete statement of my (our) financial condition on _____, 20____. I (We) hereby acknowledge that you intend to place substantial reliance on the representations herein to determine whether you will extend or renew credit to me (us). I (We) also agree to notify you immediately in writing of any material change, favorable or unfavorable, in my(our) financial condition and to furnish a new statement of my (our) financial condition each year or as often as requested by you so long as I am(we are) borrowing, guaranteeing or endorsing at your institution, but until and unless you receive such notification, I(we) hereby acknowledge that you shall continue to rely upon the representations herein as a true, accurate and complete statement of the financial condition of the undersigned. It is requested that actual rather than estimated figures be given, that the current and non-current portion of assets and liabilities be properly segregated, and that all supporting schedules be completed. PLEASE SIGN ON PAGE 4.

ASSETS				LIABILITIES			
Cash in Checking And Savings Accounts (Sch. 1)				Notes Payable to Banks (Sch. 4)			
Notes Receivable (Sch. 2)				Notes Payable to Others (Sch. 4)			
Accounts Receivable (Sch. 2)				Accts Payable Incl. Credit Cards, Revolvers (Sch. 4)			
U.S. Government Bonds				Unpaid Interest, Taxes, etc.			
Listed Marketable Stocks & Bonds(Pledged)(Sch. 3B)				Installment Notes due within a year (Sch. 5)			
Listed Marketable Stocks & Bonds (Unpldgd)(Sch. 3B)				Loans on Life Insurance			
Life Insurance (Cash Value Only)				Other Current Liabilities			
Total Current Assets				Total Current Liabilities			
Land & Buildings (Sch. 6A) - 100% Ownership				Mortgages/Liens on 100% Owned Real Estate			
Investment in Limited Partnership (Sch. 7) - <100%				Mortgage/Liens on Real Estate (less than 100% owned)			
Furniture & Fixtures				Installment Notes due after a year (Sch.5)			
Automobiles and other personal property				Other Long-Term Debt			
IRA Keogh Profit Sharing & Vested Retirement Accounts							
Valuation of Business Interest (Corporations, Partnerships, Trusts)				Total Liabilities			
Other Assets				Net Worth			
Total				Total			

CONTINGENT LIABILITIES	N	Y	AMOUNT
Are you a guarantor, co-maker, or endorser for any debt of an individual, corporation or partnership? Are you contingently liable on any lease or contract?			

FISCAL YEAR ENDED	20__	FISCAL YEAR ENDED	20__
Salary See Tax Returns on File		Salary See Tax Returns on File	
Commissions		Commissions	
Dividends		Dividends	
Interest		Interest	
Rents & Royalties		Rents & Royalties	
Capital Gains		Capital Gains	
Other		Other	
Total	\$	Total	\$

SCHEDULE 1: DEPOSITS List Banks and Name Each Account is in	Account Number	Amount	SCHEDULE 2: NOTES AND ACCOUNTS RECEIVABLE List Name and Address of Maker or Payor and to Whom Owed	Monthly Amount	Total Amount
Checking					
Savings					
	Total	\$		Total	\$

SCHEDULE 3A: VALUATION OF BUSINESS INTERESTS (INCLUDES CORPORATION, PARTNERSHIPS, TRUSTS)		SCHEDULE 3B: LISTED STOCKS AND BONDS PLEGGED AND NON-PLEGGED				
		Name of Owner Name of Security	No. Shares	Market Value	When Pledged	
Business Name		<u>Pledged</u>				
Percentage of Ownership:						
Gross Income						
Net Income						
Current Maturities						
Total Liabilities		<u>Unpledged</u>				
Net Worth						
Estimated Value of Your Ownership Interest						
Personal Liability for Business Debt (If yes, please indicate the amount of liability)						

SCHEDULE 4: NOTES/ACCOUNTS PAYABLE List Maker(s), Payee and Address	Monthly Amount	Total Amount	Secured:	SCHEDULE 5: INSTALLMENT NOTES List Maker(s), Payee and Address	Opening Date	Unpaid Balance	Monthly Payment
Total							

SCHEDULE 6A: DESCRIPTION OF 100% OWNED REAL ESTATE (Monthly Real Estate Payment Includes: _____ Interest _____ Tax Escrow _____ Insurance _____ Principal)

Title in Name of/ Property Address	Type of Property	Purchase Price	Date of Purchase	Mkt Value/ Appraised Value	Mortgage Holder/ Loan Number	Mortgage Amount	Monthly Payment	Annual Taxes & Ins.	Annual Gross Income	Annual Net Income

*Please circle Market or Appraised Value

SCHEDULE 6B: DESCRIPTION OF LESS THAN 100% OWNED REAL ESTATE (Monthly Real Estate Payment Includes: _____ Interest _____ Tax Escrow _____ Insurance _____ Principal)

Title in Name of/ Property Address	Type of Property	Purchase Price/ % Owned	Date of Purchase	Mkt Value/ Appraised Value	Mortgage Holder/ Loan Number	Mortgage Amount	Monthly Payment	Annual Taxes & Ins.	Annual Gross Income	Annual Net Income

*Please circle Market or Appraised Value

SCHEDULE 7: REAL ESTATE LIMITED PARTNERSHIP(S)(IF APPLICABLE)

TYPE OF INVESTMENT	Percent Owned	Date of Initial Investment	Cost	Current Market Value	Balances Due On Partnerships: Notes, etc.	Financial Contribution To Date
Business/Professional(indicate name):						
Investments (Including Tax Shelters):						

Please attach all Ltd Partnership Schedules from your most recent Tax Return. Please attach a separate sheet, completed in the above format for all real estate that is not included above.

Please complete the following:

1. Income Tax Returns filed through (date) _____
2. Are any returns past due or currently being audited or contested? _____
3. Have (either of) you ever declared bankruptcy? _____
4. Do (either of) you have a line of credit, letter of credit, surety bond or unused credit facility at any other institution? _____
5. Do you have a Will or Trust? _____ Executor or Trustee _____
6. Employer _____ Number of Years _____ Phone _____
7. Life Insurance (Face Value) _____ Name of Company _____

 Policy # _____ Beneficiary _____
 Name of Company _____ Policy # _____
 Beneficiary _____
8. Are there any suits/legal actions pending against you? _____ If yes, give details below.
9. What would be your total estimated tax liability if you were to sell your major assets? _____
10. Do you have any other financial obligations (including but not limited to alimony and child support, and commitments to fund future tax shelter investments)? If yes, give details. _____

PLEASE INCLUDE THREE YEARS OF FEDERAL AND STATE TAX RETURNS ALONG WITH SUPPORTING SCHEDULES OF S-CORPS AND ANY SIGNIFICANT INVESTMENT.

COMMENTS AND ADDITIONAL DETAIL

The undersigned agrees that if the undersigned becomes insolvent; commits an act of Bankruptcy, fails to notify MountainOne Bank of any material change as herein agreed, or if this statement, or any part thereof, is false or misleading in any respect, each and all of my (our) obligations and/or liabilities of every kind to you, whether joint or several, primary or secondary, direct or contingent, shall, at your option, become immediately due and payable, all without demand or notice of any kind.

The foregoing statements have been carefully read by the undersigned and I/we hereby solemnly declare and certify that the same is a true, accurate and complete statement of the financial condition of the undersigned necessary for a full and clear understanding of my/our financial condition.

I/We hereby authorize MountainOne Bank to conduct credit inquiries for the purpose of analyzing the creditworthiness of the applicant for the credit for which this Personal Financial Statement is being furnished on me/us, including securing a consumer report on me/us in connection with the application for credit or for a review of the credit at any time that the credit, if granted, remains outstanding. I/We hereby authorize MountainOne Bank to furnish credit references to third parties based upon its experience with the credit being applied for, including my/our performance of my/our obligations with respect to said credit.

Penalty for knowingly making any false statement or willfully overvaluing assets on this Financial Statement. Fine of not more than \$5,000 or imprisonment of not more than two years, or both - Title 18 United States Code, Sec. 1014.

Date Signed	Signature	D.O.B	SS #
_____	_____	_____	_____

Date Signed	Signature	D.O.B	SS #
_____	_____	_____	_____