| PER | SONAL | . FINANCIA | STATEMENT | ΓAS | OF | |
|-----|-------|------------|-----------|-----|----|--|
|-----|-------|------------|-----------|-----|----|--|

Date SUBMITTED TO:

| | | | PER | SONAL II | VFORMATION | | | | |
|---------------------------|--|--|---|---|---------------------------|-------------------------------|-------------------|--|-------------|
| APPLICANT (NAME) | | | | | CO-APPLICANT (NAI | ME) | | | |
| Employer | | | | 40 | Employer | | | | |
| Address of Employer | and the second s | | | | Address of Employer | | | | |
| Business Phone No. | No. of Years with Employer | Title/Position | y a naman kili Walionia | | Business Phone No. | No. of Years with Employer | Title/Position | | |
| Name of previous employer | & position (if with curr | ent employer less | than 3 yrs.) | No. of Yrs. | Name of previous employer | & position (if with curr | ent employer less | than 3 yrs.) | No. of Yrs. |
| Home Address | | | *************************************** | | Home Address | | | ages a grande and a | |
| Home Phone No. | Social Security No. | - v _{olu} (div. di | Date of Birth | novakuhannannannannan saa saa saasaan saa ka piir attiinka piinka saa saasaa saa saa saa saa saa saa sa | Home Phone No. | Social Security No. | | Date of Birth | |
| Name, Phone No. of your | Accountant | | | | Name, Phone No. of your A | Accountant | | | |
| Name, Phone No. of your | Attorney | Andrew of the Control | | | Name, Phone No. of your A | Attorney | | | |
| Name, Phone No. of your | Investment Advisor/Br | roker | | | Name, Phone No. of your I | | oker | | |
| Name, Phone No. of your | Insurance Advisor | | | | Name, Phone No. of your I | Insurance Advisor | | | |

Cash Income & Expenditures Statement For Year Ended ______ (Omit cents)

| ANNUAL INCOME | AMOUNT (\$) | ANNUAL EXPENDITUR | RES | AMOUNT (\$) |
|--------------------------------------|-------------|---|--|-------------|
| Salary (applicant) | \$ | Federal Income and Other Taxes | | \$ |
| Salary (co-applicant) | | State Income and Other Taxes | | |
| Bonuses & Commissions (applicant) | | Rental Payments, Co-op, or Condo Maintenance | and an annual state of the stat | |
| Bonuses & Commissions (co-applicant) | | Mortgage Payments | Residential Investment | |
| Rental Income | | Property Taxes | Residential Investment | |
| Interest Income | | Interest & Principal Payments on Loans | | |
| Dividend Income | | Insurance | overtee a servenore de Serve e pelle d'attragation des la cet à l'Année de Company (note à l'Année de Company | |
| Capital Gains | | Investments (including tax shelt | ers) | |
| Partnership Income | | Alimony/Child Support | | |
| Other Investment Income | | Tuition | | |
| Other Income (List)** | | Other Living Expense | | |
| A | | Medical Expenses | | |
| | | Other Expense (List) | | |
| TOTAL INCOME | \$ | TOTAL EXPENDI | TURES > | \$ |

Any significant changes expected in the next 12 months?

Yes No (If yes, attach information.)

** Income from alimony, child support, or separate maintenance income need not be revealed if the applicant or co-applicant does not wish to have it considered as a basis for repaying this obligation.

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ORDER FROM Bankers Systems, Inc., St. Cloud, MN 55302
These forms are intended for use in commercial lending transactions.
Where any other use is contemplated, it is suggested that a careful review be made to ensure compliance with applicable laws and regulations.

| Balance Sheet as of | | | | | | | |
|--|-------------------|-----------------------|--|--|--|---|---|
| ASSETS | AMOUNT (\$) | | LIABILITIES | | AMO | HAL | T (¢) |
| Cash in this Bank | | Notes Payable to | | | | | Χ |
| (including money market accounts, CDs) | \$ | Secured | 57 17 GF 60 QF 1 1 1 1 | | \$ | | |
| Cash in Other Financial Institutions (List) | | Unsecured | | | +* | | PT - 13 PT - 1 - V WHITE |
| (including money market accounts, CDs) | | Notes Payable to | Others (Schedule E) | | X | Χ | Χ |
| | | Secured | | | 1 | | |
| | | Unsecured | | | 1 | | |
| | | Accounts Payable | (including credit cards) | | THE STATE OF THE S | | |
| | | Margin Accounts | | anderson to the service of a former representative of the control | | | |
| Readily Marketable-Securities (Schedule A) | | Notes Due: Partne | ership (Schedule D) | The same and the s | | | *************************************** |
| Non-Readily Marketable Securities (Schedule A) | | Taxes Payable | | The Control of the Co | | | PART STATE OF THE PART OF |
| Accounts and Notes Receivable | | Mortgage Debt (S | chedule C) | | | *************************************** | * |
| Net Cash Surrender Value of Life Insurance (Schedule B) | | Life Insurance Lo | ans (Schedule B) | | | *************************************** | - |
| Residential Real Estate (Schedule C) | | Other Liabilities (I | List): | | | | |
| Real Estate Investments (Schedule C) | | | | | | · | |
| Partnerships / PC Interests (Schedule D) | | | Accessing to the control of the cont | | | | |
| IRA, Keogh, Profit-Sharing & Other Vested Retirement Accts. | | | | | | | *************************************** |
| Deferred Income (number of years deferred) | | | The state of the s | | | | |
| Personal Property (including automobiles) | | | | The state of the s | | | |
| Other Assets (List): | | | | | | | ATTENDED TO SERVICE WITH |
| | | | | | | | ACCURATION OF THE PARTY OF THE |
| | | | | | | | |
| | | | | The second secon | | | - |
| | | | T | TAL LIABILITIES | | | - |
| | | | | NET WORTH | | | AND THE RESERVE OF THE PERSON |
| | \$ | | | | \$ | *************************************** | *************************************** |
| ı | | | | | | | |
| CONTINCENT LIABULITIES | | | | | | *************************************** | |
| CONTINGENT LIABILITIES | | | YES | NO . | NUOMA | T | |
| Avairable and a second and a second as | | | p | yamaya ay | | | |
| Are you a guarantor, co-maker, or endorser for any debt of ar | individual, corpo | ration, or partnershi | p? | LJ \$ | | | |
| Do you have any outstanding letters of credit or surety bonds | ? | | - Secretary or an analysis of the secretary of the secret | | | | |
| Are there any suits or legal actions pending against you? | | | | | - | | |
| Are you contingently liable on any lease or contract? | | | | | | | |
| Are any of your tax obligations past due? | | | | formation of the contract of t | | | |
| What would be your total estimated tax liability if you were to | cell your major a | ceate? | | | | | |
| | oon your major a | 33013 : | | | *************************************** | ~~~ | |
| If yes for any of the above, give details: | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | *************************************** | |
| 0-1-1-5 4110 111 (1-1-1) | | | | | | | |
| Schedule A - All Securities (including non-money mai | rket mutual funi | ds) | Y | | | | |
| No. of Shares (Stock) or Face Value (Bonds) DESCRIPTION DWN | ER(S) | WHERE HELD | COST | CURRENT | F | PLEDG | ED |
| | | | | MARKET VALUE | YE | S | NO |
| READILY MARKETABLE SECURITIES (including U.S. Governments and Municipals)* | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| VAL PERDUY MARKET PARKET | | | | | | | |
| NON-READILY MARKETABLE SECURITIES (closely held, thinly traded, or restricted stock) | | | | | | | |
| | | | | | | | |

 $^{^{\}star}\,$ If not enough space, attach a separate schedule or brokerage statement and enter totals only.

| Schedule B - Insurance Life Insurance (use additiona | I sheet if nece | ssarv) | | | | | ************************************** | | *************************************** | *************************************** | | | |
|--|-----------------------------|---|---|---------------|---|---|--|--|---|--|---|--|--|
| Insurance Company | Face Amount of Policy | | nllou | | Danelle | 2 | | Cas Surren | ıder | Amou | | | and demokratic constraints appropriet to the transportation of a special appropriate and a special appropriate and the special appropriate appropriate and the special appropriate appropriate appropriate appropriate appropriate and the special appropriate app |
| | Tuney | Type of F | uncy | | Benefic | lary | | Valu | 18 | Borrov | ved | | Ownership |
| | | | | | | | | | | | | | |
| | | | | | *************************************** | | | | | | | | |
| Disability Insurance | | 8 | | | *************************************** | | | | | | | | |
| Monthly Distribution if Disable | | Арг | licant | | - | Co-Applic | ant | | | | | | |
| lumber of Years Covered | | | | | | 100 C C C C C C C C C C C C C C C C C C | | | | | | | |
| chedule C - Personal Res | idence & R | eal Estate I | nvestm | ents. Mort | gage | Debt (m | aiorii | tv กพกค | ershin | only) | | Description of the second seco | - The state of the |
| ersonal Residence | | | Pu | rchase | | Warket | Pi | resent Loan | Inter- | Loan | Ma | | And the state of t |
| Property Address | Ow | gal ner | Year | Price | | Value | | alance | Rate | Maturity Date | Pay | nthly ment | Lender |
| | | | *************************************** | | | | Part Company and a series and a | | | | | | |
| | | | | | | *************************************** | *************************************** | | | | | | |
| | | | | | | | | | | | | | |
| ivestment | Le | gal | | rchase | ľV | /larket | Pr L | esent Loan | Inter- est | | | nthly | |
| Property Address | Ow | ner | Year | Price | | Value | Ва | lance | Rate | Date ' | Pay | ment | Lender |
| | | | **** | | | OPPOPPER STORES A F A F AF THE THORN AND AN AND AND AND AND AND AND AND AND | MANA combinery garagean entrein | | | | | | римен Врумент на Повет в 18 г. н. |
| | | | ger - managed de d | | | | | ************************************** | | OFFIEL STREET, CONTRACTOR OF THE STREET, CON | | | The state of the s |
| | | | | | | | | | | | | | |
| chedule N - Partnerchine | (loss than n | alaxib. | | | | ************************************** | | | | | | | |
| chedule D - Partnerships Type of Investment | (iess man n | lajority owi Date of Initial | iersnip | Tor real es | state | Percen | t | Curr | ent Mark | et | | e Due on | Final |
| siness/Professional (Indicate name); | | Investmen | t | | | Owned | | | Value | | Notes, | erships: Cash Call | Contributio Date |
| | | | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | |
| vestments (Including Tax Shelters): | | | | | | | | | *************************************** | | | | |
| | | | | | *************************************** | | | | | | | | |
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| lote: For investments which invartnership investments or S-c | represent a m | aterial portio | n of you | ır total asse | ts, ple | ease inclu | de the | relevar | nt finan | cial staten | nents or | tax returns | , or in the cas |
| | | | 5. | | | | | | | | | | |
| chedule E - Notes Payable | | | 1 | | | 1 - | | | | | *************************************** | | |
| Due to | Type of | Facility | | Amount of Lin | е | Yes | ed No | C | ollateral | | nterest Rate | Maturity | Unpaid Balance |
| | | *************************************** | | | | | \Box | | | | | | |

| Please Answer The Following Questions: | |
|--|--|
| | Are any returns currently being audited or contested? Yes No |
| | |
| 2. Have (either of) you or any firm in which you were a major owne | |
| | |
| 3. Have you drawn a will? Yes No | |
| If yes, please furnish the name of the executor(s) and year will w | as drawn: |
| 4. Number of dependents (excluding self) and relationship to applic | ant: |
| 5. Have you ever had a financial plan prepared for you? | □No |
| 6. Did you include two years federal and state tax returns? | es 🗌 No |
| 7. Do (either of) you have a line of credit or unused credit facility at | any other institution(s)? |
| If so, please indicate where, how much, and name of banker: | |
| | |
| | |
| 8. Do you anticipate any substantial inheritances? $\ \ \Box$ Yes $\ \ \Box$ M | lo |
| If yes, please explain: | |
| | |
| | |
| | |
| | |
| Representations and Warranties | |
| The information contained in this statement is provided to induc | ce you to extend or to continue the extension of credit to the undersigned or to others upon |
| The information contained in this statement is provided to induct the guarantee of the undersigned. The undersigned acknowledge a or continue credit or to accept a guarantee thereof. Each of the undersigned acknowledge and the undersigned acknowledge and the undersigned acknowledge. | nd understand that you are relying on the information provided herein in deciding to grant indersigned represents, warrants and certifies that the information provided herein is true, |
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