Personal Financial Statement

As of Date:	20
As of Date:	, 20

The following personal financial statement is submitted to Business Lending Services, LLC. for the purpose of procuring, establishing, and maintaining credit. You are authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein and to determine my/our credit worthiness.

For Wisconsin Residents only: I am unmarried legally separated

NOTICE TO MARRIED APPLICANTS: No provision of any marital property agreement, unilateral statement under § 766.59, Wis. Stats., or court decree under § 766.70, Wis. Stats., adversely affects the interest of the creditor unless the creditor, prior to the time the credit is granted or an open-end credit plan is entered into, is furnished a copy of the agreement, statement or decree or has actual knowledge of the adverse provision.

INSTRUCTIONS FOR INFORMATION TO BE SUPPLIED BELOW:

If married applicants are applying for joint credit, include all assets and all liabilities of both spouses. Both spouses must sign this statement. If a married applicant is applying for separate credit or for joint credit with someone other than his or her spouse, include all marital property and all individual property of the applicant spouse but do <u>not</u> include individual property of the other spouse.

For purposes of this statement:

Marital property means assets acquired with my or my spouse's income on or after 1-1-86; and

Individual property means property owned (whether in joint or sole name) by me prior to marriage, prior to establishing residence in Wisconsin, or Prior to 1-1-86, however acquired, and property acquired by me by gift or inheritance at any time.

APPLICANT INFORMATION (type or print)		CO-APPLICANT INFORMATION (type or print)							
Full Name:	Birthdate:	Full Name: Birt	hdate:						
Social Security #:		Social Security #:							
Residence Address:		Residence Address:							
City, State, Zip:		City, State, Zip:							
Position or Occupation:		Position or Occupation:							
Business Name/Employer:		Business Name/Employer:							
Business Address:		Business Address:							
City, State, Zip:		City, State, Zip:							
Res. Phone: Bus. Phone:		Res. Phone: Bus. Phone:							
ASSETS	DOLLARS	LIABILITIES	DOLLARS						
Cash and on Deposit (Schedule A	\$	Short-Term Notes Due (Schedule F)	\$						
Govt. and Listed Securities (Schedule B)	Installment Notes Due (Schedule F)							
Unlisted Securities (Schedule B)								
Accounts and Notes Receivable (Schedule C	(1)								
Cash Value Life Insurance (Schedule D)	Life Insurance Loans (Schedule F)							
Residence (Schedule E)								
Other Real Estate Owned (Schedule E)	Real Estate Mortgages (Schedule E)							
Retirement Funds									
Vehicles Owned									
Other Personal Property (Please Itemize)	Other Debts/Liabilities (Please Itemize)							
Other Assets		Unpaid Taxes							
		TOTAL LIABILITIES	\$						
		NET WORTH	\$						
TOTAL ASSETS	\$	TOTAL LIABILITIES AND NET WORTH	\$						
ANNUAL INCOME*	DOLLARS	CONTINGENT LIABILITIES							
Salary	\$	Endorser:	\$						
Other Income (itemize) **		Co-Maker:							
		Guarantor:							
Spouse Salary		Income Tax:							
Other Income (itemize) **		On Leases/Contracts:							
		Other:							
TOTAL	\$	TOTAL	\$						
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^{*} Married Wisconsin Residents signing individually, include income of spouse

PERSONAL INFORMATION
Are you a partner or officer in any other venture? If so, describe.
Have you ever declared bankruptcy? If so, describe.
Do you have a will? If so, name of personal representative.
Are you a defendant in any legal actions or suits? If so, describe.

^{**} Income from alimony, child support, or separate maintenance income need not be revealed if you do not wish the credit union to consider the income in determining your credit worthiness.

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of Face Val	lue													Yes/No
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Schedule C	(Acco	ants and Notes R		ı				<u> </u>						-
		Description						Owed B	y				Amount	Due
Schedule D	(Life l	nsurance Carrie											1	
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Applicant Signature