PERSONAL FINANCIAL STATEMENT

The purpose of this form is to collect information about the Business Applicant and its owners' financial condition. RLFC uses the information required by this Form as one of a number of data sources in analyzing the repayment ability and creditworthiness of an applicant for an RLF loan or, with respect to a surety bond, to assist in recovery in the event that the contractor defaults on the contract. Failure to provide the information would impact the Committee's decision on your application.

To complete this form

- 1) Check all that apply.
- 2) Complete the form in its entirety (attached a separate sheet, if necessary)
- 3) Review the applicable certifications and sign (spousal signature, if required)

Revolving Loan Fund

Complete this form for: (1) each proprietor; (2) general partner; (3) managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant; and (5) any person providing a guaranty on the loan (including the assets and liabilities of the owner's spouse and any minor children).

Name	Business Phone (xxx-xxx-xxxx)			
Home Address	Home Phone (xxx-xxx-xxxx)			
City, State, & Zip Code				
Business Name of Applicant/Borrower				
Business Address (if different than home address)				
Business Type: Corporation S-Corp. LLC Partners	nip Sole Proprietor (does not apply to ODA applicant)			
This information is current as of [month/day/year] (within 90 days of submission for 7(a)/504/SBG/ODA/WOSB or within 30 day	vs of submission for 8(a) BD)			

ASSETS	(Omit Cents)	LIABILITIES	(Omit Cents)
Cash on Hand & in banks		Accounts Payable	
Savings Accounts		Notes Payable to Banks and Others	
RA or Other Retirement Account		(Describe in Section 2)	
(Describe in Section 5)		Installment Account (Auto)	
Accounts & Notes Receivable		Mo. Payments	
(Describe in Section 5)		Installment Account (Other)	<u> </u>
Life Insurance – Cash Surrender Value Only		Mo. Payments	
(Describe in Section 8)		Loan(s) Against Life Insurance	
Stocks and Bonds		Mortgages on Real Estate	
(Describe in Section 3)		(Describe in Section 4)	
Real Estate		Unpaid Taxes	
(Describe in Section	4)	(Describe in Section 6)	
Automobiles		Other Liabilities	
(Describe in Section 5, and include		(Describe in Section 7) Total Liabilities	¢O
Year/Make/Model)		Net Worth	
(Describe in Section 5)	·		
Other Assets		Total	\$0
(Describe in Section 5)	<u>.</u>		al in assets columr
Total	\$ 0		
Section 1. Source of Income.		Contingent Liabilities	
Salary		As Endorser or Co-Maker	
Net Investment Income	•	Legal Claims & Judgments	······
Real Estate Income			
Other Income (Describe below)	Other Special Debt		

Description of Other Income in Section 1 (Alimony or child support payments should not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income)

Names and Addresses of Noteholder(s)		of Original Balance		Current Balance	Payment Amount	Frequency (monthly, etc.)		How Secured or Endorsed Type of Collateral	
Section 3. Stocks an	d Bonds	s. (Use atta	achments if nec	essary. Each at	tachment must be	identified as pa	rt of this state	ement and signed	.)
Number of Shares Name		ame of Securities		Cost				ate of Total Value	
ection 4. Real Estate	Owned	. (List eac	h parcel separa	itely. Use attach	ment if necessary	. Each attachm	ent must be i	dentified as a pa	rt of this statement
			Property	A	I	Property B		Pr	operty C
ype of Real Estate (e Primary Residence, Ot Residence, Rental Prop and, etc.)	her								
ddress									
ate Purchased									
Driginal Cost									
Present Market Value									
lame & Address of /ortgage Holder									
lortgage Account Nun	nber								
Nortgage Balance									
mount of Payment pe /onth/Year	r								
Status of Mortgage									
Section 5. Other Personal older, amount of lien,							s security, s	tate name and	address of lien

Section 6. Unpaid Taxes. (Describe in detail as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

Section 7. Other Liabilities. (Describe in detail.)

Section 8. Life Insurance Held. (Give face amount and cash surrender value of policies – name of insurance company and Beneficiaries.)

I authorize the RLFC to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness.

<u>CERTIFICATION</u>: (to be completed by each person submitting the information requested on this form and the spouse of any 20% or more owner when spousal assets are included)

By signing this form, I certify under penalty of criminal prosecution that all information on this form and any additional supporting information submitted with this form is true and complete to the best of my knowledge. I understand that RLFC or its participating Lenders or Certified Development Companies or Surety Companies will rely on this information when making decisions regarding an application for a loan. I further certify that I have read the attached statements required by law and executive order.-

Signature	Date
Print Name	Social Security No.
Signature	Date
Print Name	Social Security No.