DEDCONAL	ETNANCTAL	STATEMENT	AC OF
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Date

SUBMITTED TO: CUMBERLAND EMPOWERMENT ZONE CORPORATION

PERSONAL INFORMATION									
APPLICANT (NAME)				CO-APPLICANT (NAME)					
Employer				Employer					
Address of Employer				Address of Employer					
Business Phone No.	No. of Years with Employer	Title/Position		Business Phone No. No. of Years with Employer			Title/Position		
Name of Previous Employer and Position (if with current employer less than 3 yrs.)			No. of Yrs.	Name of Previous Employer and Position (if with current employer less than 3 yrs.) No. of Yrs.					
Home Address				Home Address					
Home Phone No.	Social Security No.	Date of E	irth	Home Phone No. Social Security No. Date of Birth					
Name/Phone No. of You	r Accountant			Name/Phone No. of Your Accountant					
Name/Phone No. of You	r Attorney			Name/Phone No. of You	r Attorney				
Name/Phone No. of You	r Investment Advisor	/Broker		Name/Phone No. of You	r Investment Adviso	r/Brok	er		
Name/Phone No. of You	r Insurance Advisor			Name/Phone No. of You	r Insurance Advisor				

Cash Income and Expenditures Statement for Year Ended ______ (omit cents)

ANNUAL INCOME	AMOUNT (\$)	ANNUAL EXPE	AMOUNT (\$)		
Salary (Applicant)	\$	Federal Income and Other	Taxes	\$	
Salary (Co-applicant)		State Income and Other To	axes		
Bonuses & Commissions (Applicant)		Rental Payments, Co-op, of Maintenance	or Condo		
Bonuses & Commissions (Co-applicant)		Mortgage Payments	Residential Investment		
Rental Income		Property Taxes	Residential Investment		
Interest Income		Interest & Principal Payme	nts on Loans		
Dividend Income		Insurance			
Capital Gains		Investments (including tax	shelters)		
Partnership Income		Alimony/Child Support			
Other Investment Income		Tuition			
Other Income (list)**		Other Living Expenses			
		Medical Expenses			
		Other Expenses (list)			
TOTAL INCOME →	\$	TOTAL	EXPENDITURES ->	\$	

Any significant changes expected in the next 12 months? ☐ Yes ☐ No (if yes, attach information)

^{**}Íncome 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.

ASSETS	AMOUNT (\$)	LIABILITIES	AMO	Γ (\$)	
Cash in This Bank		Notes Payable to This Bank	Х	Х	Х
(including money market accounts, CDs)	\$	Secured	\$		
Cash in Other Financial Institutions (list)		Unsecured			
(including money market accounts, CDs)		Notes Payable to Others (Schedule E)	Х	Х	Х
		Secured			
		Unsecured			
		Accounts Payable (including credit cards)			
		Margin Accounts			
Readily Marketable Securities (Schedule A)		Notes Due: Partnership (Schedule D)			
Non-Readily Marketable Securities (Schedule A)		Taxes Payable			
Accounts and Notes Receivable		Mortgage Debt (Schedule C)			
Net Cash Surrender Value of Life Insurance (Schedule B)		Life Insurance Loans (Schedule B)			
Residential Real Estate (Schedule C)		Other Liabilities (list)			
Real Estate Investments (Schedule C)					
Partnerships/PC Interests (Schedule D)					
IRA, Keogh, Profit-sharing and Other Vested Retirement Accounts					
Deferred Income (number of years deferred)					
Personal Property (including automobiles)					
Other Assets (list)					
		TOTAL LIABILITIES			
		NET WORTH			
	\$		\$		

CONTINGENT LIABILITIES	YES	NO	AMOUNT
Are you a guarantor, co-maker or endorser for any debt of an individual, corporation or partnership?			\$
Do you have any outstanding letters of credit or surety bonds?			
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?			
What would be your total estimated tax liability if you were to sell your major assets?			
If yes for any of the above, give details.			

Schedule A – Al	l Securities (including i	non-money market mut	ual funds)				
No. of Shares (Stock) or	(Stock) or Description	Owner(s)	Where Held	Cost	Current	Pledged	
Face Value (Bonds) Where neur (S)	COST	Market Value	Yes	No			
Readily marketabl	le Securities (including U.S	6. Government and Municip	als)*				
Non-Readily Mark	etable Securities (closely h	neld, thinly traded or restric	cted stock)				
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^{*}If not enough space, attach a separate schedule or brokerage statement and enter totals only.

Schedule B – Insurance Life Insurance (use additional sheet if necessary)													
Insurance Company	Face Amount of Policy	Type of Policy	Beneficiary	Cash Surrender Value	Amount Borrowed	Ownership							

Disability Insurance	Applicant	Co-applicant
Monthly Distribution if Disabled		
Number of Years Covered		

Schedule C – Persona	Schedule C – Personal Residence & Real Estate Investments, Mortgage Debt (majority ownership only)										
Personal Residence	Logal	Purc	hase	Maylot	Duccont	Turkawash	Loan	Manthly			
Property Address	Legal Owner	Year	Price	Market Value	Present Loan Balance	Interest Rate	Maturity Date	Monthly Payment	Lender		
Investment	Legal	Purc	hase	Market	Present	Interest	Loan Maturity	Monthly			
Property Address	Owner	Year	Price	Value	Loan Balance	Rate	Date	Payment	Lender		

Schedule D – Partnerships (less than majority ownership for real estate partnerships)*											
Type of Investment	Date of Initial Investment	Cost	Percent Owner	Current Market Value	Balance Due on Partnerships: Notes, Cash Call	Final Contribution Date					
Business/Professional (indicate name)											
Investments (including tax shelters)											

^{*}NOTE: For investments which represent a material portion of your total assets, please include the relevant financial statements or tax returns, or in the case of partnership investments or S-corporations, schedule K-1s.

Schedule E - Notes								
Due to	Tune of Facility	Amount of Line	Secured		Callataval	Interest	Makuuik	Unpaid
	Type of Facility	Amount of Line	Yes	No	Collateral	Rate	Maturity	Balance

Please Answer the Following Questions:	
Income Tax returns filed through (date)	Are any returns currently being audited or contested? Yes No
If yes, what year(s)?	
2. Have (either of) you or any firm in which you were a major owner ever declared bankruptcy? Yes	
If yes, please provide details:	
3. Have you drawn a will? ☐ Yes ☐ No	
If yes, please furnish the name of the executor(s) and year the will was drawn:	
4. Number of dependents (excluding self) and relationship to applicant	
5. Have you ever had a financial plan prepared for you? ☐ Yes ☐ No	
6. Did you include two years federal and state tax returns? ☐ Yes ☐ No	
7. Do (either of) you have a line of credit or unused credit facility at any other institution(s)? ☐ Yes ☐ No	
If so, please indicate where, how much, and name of banker:	
8. Do you anticipate any substantial inheritances? □ Yes □ No	
If yes, please explain:	
Representations and Warranties	
The information contained in this statement is provided to induce you to extend or to continue the extension of credit to the undersigned or to others upon the guarantee of the undersigned. The undersigned acknowledge and understand that you are relying on the information provided herein in deciding to grant or continue credit or to accept a guarantee thereof. Each of the undersigned represents, warrants and certifies that the information provided herein is true, correct and complete. Each of the undersigned agrees to notify you immediately and in writing of any change in name, address or employment and of any material adverse change (1) in any of the information contained in this statement or (2) in the financial condition of any of the undersigned or (3) in the ability of any of the undersigned to perform its (or their) obligations to you. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. If the undersigned fail to notify you as required above, or if any of the information herein should prove to be inaccurate or incomplete in any material respect, you may declare the indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, immediately due and payable. You are authorized to make all inquiries yo deem necessary to verify th accuracy of the information contained herein and to determine the credit-worthiness of the undersigned. The undersigned authorize any person or consumer reporting agency to give you any information if may have on the undersigned. Each of the undersigned authorized you to answer questions about your credit experience with the undersigned. As long as any obligation or guarantee of the undersigned to you is outstanding, the undersigned shall supply annually an updated financial statement. This personal financial statement and any other financial or other information that the undersigned give you shall be your property.	
Date	Your Signature
Date	Co-applicant's Signature (if you are requesting the financial accommodation jointly)