a.p.strom
& ASSOCIATES

PERSONAL FINANCIAL STATEMENT

TO A.P.Strom and Associates

APPLICANT

HOME ADDRESS

TELEPHONE NO.

E-MAIL ADDRESS

SUMMARY WORKSHEET

Assets	*Even Dollars*	*Liabilities and Net Worth*	*Even Dollars*
Cash on hand and in Banks—Schedule A		Notes Payable: This Bank—Schedule A	
Government Securities—Schedule B		Notes Payable: Other Institutions—Schedule A	
Listed Securities—Schedule B			
Unlisted Securities—Schedule B		Notes Payable—Relatives	
Other Equity Interests—Schedule B		Notes Payable—Others	
Accounts and Notes Receivable		Accounts and Bills Due	
Real Estate Owned—Schedule C		Unpaid Taxes	
Mortgages and Land Contracts Receivable —Schedule D		Real Estate Mortgages Payable—Schedule C or D	
Cash Value Life Insurance—Schedule E		Land Contracts Payable—Schedule C or D	
Other Assets: Itemize		Life Insurance Loans—Schedule E	
		Other Liabilities: Itemize	
		TOTAL LIABILITIES	$
		NET WORTH	$
TOTAL ASSETS	$	**TOTAL LIABILITIES AND NET WORTH**	$

Sources of Income	*Even Dollars*	*General Information*	
Salary	$	Employer	
Bonus and Commissions		Position or Profession	No. Years
Dividends		Employer's Address	
Real Estate Income		Phone No.	
*Other Income: Itemize		Partner, officer or owner in any other venture? If so, explain:	
TOTAL	$		
*Alimony, child support or separate maintenance payments need not be disclosed unless relied upon as a basis for extension of credit. If disclosed, payments received under court order, written agreement, or oral understanding.		Are any assets pledged?	
		If yes, detail in Schedule A	
		Income taxes settled through	

Contingent Liabilities	*Even Dollars*	
As endorser, co-maker or guarantor	$	Are you a defendant in any suits or legal action? If so, explain:
On leases		
Legal claims		Have you ever declared bankruptcy? If so, explain:
Provision for federal income taxes		
Other special debt, e.g., recourse or repurchase liability		Do you have a will? If yes, who is the beneficiary?
		Do you have a trust? With whom?
TOTAL	$	Number of dependants Ages

SCHEDULES

Schedule A: Banks, Brokers, Savings & Loan Association, Finance Companies or Credit Unions. List here the names of all the institutions at which you maintain a deposit account and/or where you have obtained loans.

Name of Institution	*Name on Account*	*Balance on Deposit*	*High Credit*	*Amount Owing*	*Monthly Payment*	*Secured by What Assets*
	TOTAL		**TOTAL**			

Schedule B: U.S. Governments, Stocks (Listed & Unlisted), Bonds (Gov't & Comm.), and Partnership Interests (General & Ltd.)

Number of Shares, Face Value (Bonds), or % of Ownership	*Indicate* *1. Agency or name of company issuing security or name of partnership* *2. Type of investment or equity classification* *3. Number of shares, bonds or % of ownership held* *4. Basis of valuation**	*In Name of*	**Market Value*	*Pledged*	
				Yes (3)	*No* (3)
		TOTAL			

*If unlisted security or partnership interest, provide current financial statements to support basis for valuation.

Schedule C: Real Estate Owned (and related debt, if applicable)

Description of Property or Address	*Title in Name Of*	*Date Acq.*	*Cost + Improvements*	*Present Mkt. Value*	*Mortgage or Land Contract Payable*		
					Bal. Owing	*Mo. Payt.*	*Holder*
		TOTAL					

Schedule D: Real Estate: Mortgages & Land Contracts Receivable (and related debt, if applicable)

Description of Property or Address	*Title in Name Of*	*Date Acq.*	*Balance Receivable*	*Monthly Payment*	*Mortgage or Land Contract Payable*		
					Bal. Owing	*Mo. Payt.*	*Holder*
		TOTAL					

Schedule E: Life Insurance Carried

Name of Company	*Face Amount*	*Cash Surrender Value*	*Loans*	*Beneficiary*
TOTAL				

a.p.strom & ASSOCIATES

CERTIFICATION

I/we have carefully read and submitted the foregoing information provided on all three pages of this statement to A.P.Strom and Associates. The information is presented as a true and accurate statement of my/our financial condition on the date indicated. This statement is provided for the purpose of making inquiries with lenders and mortgage brokers. I/we agree that if any material change(s) occur(s) in my/our financial condition that I/we will immediately notify A.P.Strom and Associates of said change(s) and, unless A.P.Strom and Associates, is so notified it may continue to rely upon this financial statement and the representations made herein as a true and accurate statement of my/our financial condition.

I/we acknowledge that this statement may be presented to a bank, credit union, financial institution, corporation, or other potential lender, and that the potential lender may rely on this statement when it evaluate I/our loan application.

I/we hereby indemnify and hold A.P.Strom and Associates harmless for any and all inaccuracies, whether intentional or unintentional, that may be contained in the information provided in this statement. I/we agree not to make any suit, take any action at law, or in any other way hold A.P.Strom and Associates liable for the errors or omissions introduced in this statement.

I/we authorize A.P.Strom and Associates to make whatever credit inquiries it deems necessary in connection with this financial statement. I/we authorize and instruct any person or consumer reporting agency to furnish to A.P.Strom and Associates any information that it may have or obtain in response to such credit inquiries.

I/we also hereby certify that no payment requirements listed herein are delinquent or in default except as follows; if "NONE" so state.

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Declarant's signature	Date	Social identification number (SIN)	Date of birth

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