

PERSONAL FINANCIAL STATEMENT
(This Form Must be Signed & Dated)

PERSONAL FINANCIAL STATEMENT AS OF _____, _____			
Name of Applicant		Social Security Number	Date of Birth:
Name of Spouse:		Social Security Number:	Date of Birth:
Residence Address (Street, City, State, & Zip Code)~			Home Phone Number (Including Area Code):
ASSETS		Account Balance	LIABILITIES
			Account Balance
Cash in Banks (Complete Schedule):		\$	Mortgages Payable (See Schedule):
Cash - Retirement Accounts:		\$	Installment Accounts - Auto (See Schedule):
Accounts Receivable (Complete Schedule):		\$	Loans Payable - Banks (Complete Schedule):
Stocks/Bonds/Securities (Complete Schedule):		\$	Notes Payable (Complete Schedule):
Real Estate - Residence (Complete Schedule):		\$	Accounts Payable (Complete Schedule):
Real Estate - Investment/Other:		\$	Loans on Life Insurance (See Schedule):
Cash Value Life Ins, (Complete Schedule):		\$	Taxes Payable:
Automobiles - Present Value:		\$	Other Liabilities (Complete Schedule):
Personal Property:		\$	TOTAL LIABILITIES:
Other Assets (Complete Schedule):		\$	NET WORTH:
TOTAL ASSETS:		\$	TOTAL NET WORTH & LIABILITIES:
INCOME:		Salary: \$	Spouse's Salary: \$
		Bonus/Other: \$	Bonus/Other: \$
			TOTAL INCOME
			\$

SUPPLEMENTARY SCHEDULES OF ASSETS & LIABILITIES
(NOTE: All data listed above must appear in the appropriate schedules. Insert "None" where appropriate.)

CASH IN BANKS				
Bank Name, Number & Location	Account Number	Amount		
		\$		
		\$		
		\$		
NOTES & ACCOUNTS RECEIVABLE				
Name & Address of Debtor	Amount Due	Due Date	Pledged (Yes/No)	Security
	\$			
	\$			
	\$			
STOCKS / BONDS / SECURITIES				
Name & Number(s) of Instrument	# - Shares	Price/Share	Market Value	Exchange & Call
				\$
				\$
				\$

You May Access Our Forms On Our Website
www.nationalsurety.com

Attach Additional *Sheets* if Necessary

REAL ESTATE (Residence/Investment/Other)							
Location & Description	Year Acquired	Original Cost	Market Value	Monthly Income	Monthly Payment	Mortgage Balance	Mortgage or Lien Holder
				\$		\$	
				\$		\$	
				\$		\$	
				\$		\$	
CASH VALUE ON LIFE INSURANCE							
Name of Insurance Company	Beneficiary	Face Value	Cash Value	Current Loans			
OTHER ASSETS							
Description	Title Holder	Original Cost	Market Value	Age			
LOANS PAYABLE							
Name of Lender	Address	Balance Due	Due in 1 Year	Loan Security			
ACCOUNTS & NOTES PAYABLE (Including Autos & Charge Accounts)							
Name of Lender	Original Amount	Current Balance	Monthly Payment	Loan Security			
			\$ \$				
			\$ \$				
			\$ \$				
			\$ \$				
			\$ \$				
OTHER LIABILITIES							
Description	Payable to Whom	Amount	Mo. Pymt,	Due Date	Loan Security		

- | | | | |
|---|---------|--------|---|
| 1) Are you contingently liable or an endorser on any bonds or other obligations? | ___ YES | ___ NO | Explain all Yes answers on a separate sheet of paper |
| 2) Are you involved in any litigation? | ___ YES | ___ NO | |
| 3) Have you filed for Bankruptcy in the last 7 years? | ___ YES | ___ NO | |
| 4) Are you the beneficiary or acting as a Trustee or Executor of any Trust(s) or Estate(s)? | ___ YES | ___ NO | |

I/We hereby certify and declare that the above statement presents accurately my/our financial condition to the best of my/our knowledge. I/We hereby acknowledge that National Surety Services, Inc., and the sureties they represent will from time to time request personal credit reports to verify the stated debt, and to track your personal payment history.

By: _____
Date: _____

By: _____
Date: _____