

Personal Financial Statement

	Guarantor/Applicant (To be filled out by the Guarantor/Applicant and each Co-Guarantor/Co-Applicant not related by marriage to the Applicant)	Co-Guarantor/Co-Applicant (To be filled out only if assets are held jointly with the Co-Guarantor/Co-Applicant)
Name		
Social Security Number		
Date of Birth		
Home Phone		
Present Address		
City, State, Zip Code		
Number of Years at Previous Address		
Employer		
Type of Business		
Position / Title		
Business Phone		
Business Address		
City, State, Zip Code		
Number of Years with Employer		
Date of Will		
Name of Executor		
Number of Dependents		
Age(s) of Dependent(s)		
Name of Nearest Relative		
Relative's Address		
City, State, Zip Code		
Total Shoute Book for Covings		

To: Liberty Bank for Savings

The undersigned (also "you" or "your") authorizes Liberty Bank for Savings (the "Bank", "we" or "us") to make whatever credit inquiries it deems necessary in connection with this Personal Financial Statement (the "Form") or in the course of review or collection of any credit extended in reliance on this Form. The undersigned further authorizes and instructs any consumer reporting agency to compile and furnish to the Bank any information that it may have or obtain in response to such credit inquiries and agree that such information, along with this Form, shall remain the property of the Bank whether or not credit is extended. The undersigned authorizes the Bank to answer questions about the Bank's credit experience with the undersigned. The information contained herein is submitted for the purpose of procuring, establishing and maintaining credit with the Bank by persons, firms or corporations on whose behalf the undersigned may either severally or jointly with others execute a guaranty in the Bank's favor. The undersigned warrants that this Form has been carefully read and is true, correct and complete and that the Bank may consider this statement as continuing to be true, correct and complete until written notice of a change is given to the Bank by the undersigned.

Signature / Date (Guarantor/Applicant)		<u> </u>
Signature / Date (Co-Guarantor/Co-Applicant)	,	l

BALANCE SHEET, as of: _	
_	Date (mm/dd/yyyy)

Assets

	Guarantor/ Applicant	Co-Guarantor / Co-Applicant	Joint Ownership	Total
Cash and Short-Term Investments (Schedule A)	\$	\$	\$	\$
Marketable Securities (Schedule B)				
Other Liquid Assets				
Total Liquid / Marketable Assets	\$	\$	\$	\$
Non-Marketable Securities (Schedule C)				
Accounts and Notes Receivable (Schedule D)				
Real Estate Investments (Schedule E)				
Real Estate Owned - Personal Residence(s) (Schedule F)				
Retirement Accounts				
Cash Value Life Insurance (Schedule G)				
Equity Interest in Business				
General and/or Limited Partnership Interests (Non-Real Estate)				
Personal Property				
Other Assets (Itemize)				
Asset 1:				
Asset 2:				
Asset 3:				
Total Assets	\$	\$	\$	\$

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Liabilities and Net Worth				
	Guarantor/ Applicant	Co-Guarantor/ Co-Applicant	Joint Ownership	Total
Notes Payable to Banks - Secured (Schedule H)	\$	\$	\$	\$
Notes Payable to Banks - Unsecured (Schedule H)				
Notes Payable - Other				
Credit Card Balances				
Accounts Payable and Bills Due				
Unpaid Income Taxes				
Other Unpaid Taxes and Interest				
Real Estate Mortgages Payable (Schedules E and F)				
Other Liabilities (Itemize)				
Liability 1:				
Liability 2:				
Liability 3:				
Total Liabilities	\$	\$	\$	\$
Net Worth (Total Assets minus Total Liabilities)	\$	\$	\$	\$
Is any bad and doubtful asset excluded from this statement?	Yes /	No / NA		
ls any assets pledged, loaned or hypothecated?	Yes /	No / NA		
Are you a partner or officer in any other venture?	Yes / No / NA			
Have you ever been bankrupt?	Yes /	No / NA		
Is any asset held in or owned by a living or land trust?	Yes /	No / NA		
Do you have a Will?	Yes /	No / NA		
Are you a defendant in any suit or legal action?	Yes /	No / NA		
If yes to any question, give details:				

STATEMENT OF INCOME AND OTHER OBLIGATIONS, as of: _	
	Date (mm/dd/yyyy)

Current Income and Taxes

	Salary	Bonus	Commis sion	Dividend / Interest Income	Real Estate Income	Other Income	Alimony / Child Support*	Total Income	Estimated Income Taxes
Guarantor/Applicant	\$	\$	\$	\$	\$	\$	\$	\$	\$
Co-Guarantor/Co-Applicant									

^{*} Include income from alimony, child support or separate maintenance payments. However, this does not need to be revealed if you do not choose to have it considered as a basis for repaying your bank obligations.

Other Obligations

	Amount of Contingent Liabilities as Endorser, Co-Maker or Guarantor	Amount of Contingent Liabilities on Leases or Contracts	Alimony, Child Support, Separate Maintenance, et al.	Amount of Legal Claims	Amount of Other Special Debt	Contested Income Tax Amount
Guarantor/Applicant	\$	\$	\$	\$	\$	\$
Co-Guarantor/Co-Applicant						

Schedules

Schedule A - Cash, Checking and Savings Accounts, Certificates of Deposit, Money Market Funds, Et Al.

Name of Financial Institution	In Name of	Type of Account	If Pledged, to Whom	Account Number	Current Balance
					\$

Total:	\$		
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Name of Security	In Name of	Which Exchange	Number of Shares	Par Value of Bonds	If Pledged, to Whom	Cost Basis	Date	Market Value
Schedule C - Non-marketable	Securities						Total:	\$
Name of Security	In Name of	Source of Value	e Percenta	age Owned	If Pledged, 1	to Whom	Date	Book Value
							Total:	\$
Schedule D - Accounts and N	lotes Receivable	If Pledged, to	Original	Monthly			Maturity	Balance
From Whom	In Name of	Whom	Amount	Payment	Interest Rate	Description	Date	Due
							Total:	\$
Schedule E - Real Estate Inve	estments							
Property Type and Address	In Name of	Percentage Owned	Date Acquired	Purchase Price	Mortgagee / Maturity Date	Mortgage Payments	Mortgage Balance	Market Value
Type:								
Address:								
City, State Zip:								
Type:								
Address:								
City, State Zip:								
Type:								
Address:								
City, State Zip:								
Type: Address:								
City, State Zip:								
Oity, Glate Zip.				1				

Schedule F - Personal Real Estate

Property Type and Address	In Name of	Percentage Owned	Date Acquired	Purchase Price	Mortgagee / Maturity Date	Mortgage Payments	Mortgage Balance	Market Value
Type:								
Address:				\$		\$	\$	\$
City, State Zip:								
Type:								
Address:								
City, State Zip:								
Type:								
Address:								
City, State Zip:								
Type:								
Address:								
City, State Zip:								

Schedule G - Life Insurance

Total: \$ \$

Name of Insurance Company	In Name of Beneficiary		Face Amount	Policy Loan Balance	Cash Surrender Value
			\$	\$	\$

Schedule H - Notes Payable

Total: \$

To Whom	In Name of	Maturity Date	Amount Due	Description	Monthly Payment	Unsecured / Secured	Total Amount Due-Secured	Total Amount Due- Unsecured
			\$		\$		\$	\$

Total: _ \$ \$