

PERSONAL FINANCIAL STATEMENT



AMERICAN INTERSTATE BANK, 3331 N. 204th Street, Elkhorn, NE 68022

Important: Read these directions before completing this Statement.

If you are applying for individual credit in your own name and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete only Sections 1 and 3.

If you are applying for joint credit with another person, complete all sections, providing information in Section 2 about the joint application.

If you are applying for individual credit, but are relying on income from alimony, child support, or separate maintenance, or on the income or assets of another person as a basis for repayment of the credit requested, complete all sections, providing information in Section 2 about the person on whose alimony, child support or maintenance payments or income or assets you are relying.

If this Financial Statement relates to your guaranty of the indebtedness of other person(s), firm(s) or corporation(s), complete Sections 1 and 3.

| Section 1 – Individual Information (Type or Print) | | Section 2 – Other Party Information (Type or Print) | |
|--|---------------|---|---------------|
| Name | | Name | |
| Residence Address | | Residence Address | |
| City, State & Zip | | City, State & Zip | |
| Position or occupation | | Position or occupation | |
| Business Name | | Business Name | |
| Business Address | | Business Address | |
| City, State & Zip | | City, State & Zip | |
| Res. Phone | Bus. Phone | Res. Phone | Bus. Phone |
| S.S. No. | Date of Birth | S.S. No. | Date of Birth |

Section 3 – Statement of Financial Condition as of _____

| ASSETS <small>(Do not include Assets of doubtful value)</small> | In Dollars | LIABILITIES | In Dollars |
|--|------------|--|------------|
| Cash on hand and in banks | \$ | Notes payable to banks – secured | \$ |
| U.S. & Marketable Securities (Sch. A) | \$ | Notes payable to banks – unsecured | \$ |
| Non-Marketable Securities (Sch. B) | \$ | Notes payable to relatives | \$ |
| Real Estate Owned (Sch. C) | \$ | Unpaid taxes | \$ |
| Notes Receivable | \$ | Real Estate mortgages payable (Sch. C) | \$ |
| Furniture and Fixtures | \$ | Other debts (Sch. E) | |
| Automobiles | \$ | | |
| Cash value-life insurance (Sch. D) | \$ | | |
| Other assets – itemize | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | TOTAL LIABILITIES | \$ |
| | | Net Worth | \$ |
| TOTAL ASSETS | \$ | TOTAL LIABILITY & NET WORTH | \$ |

| Sources of Income for Year Ended | Personal Information (Provide details on separate sheet) |
|----------------------------------|--|
|----------------------------------|--|

| | |
|---|--|
| Salary, Bonuses & Commissions | Do you have a will? If so, name of executor: |
| Dividends/Interest Income | Are you a partner or officer in any venture? If so, describe. |
| Real Estate/Rental Income | Are you obligated to pay alimony, child support or separate maintenance payments? If so, describe. |
| Other Income \$ Alimony, child support or separate maintenance received under Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding <input type="checkbox"/> <i>Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.</i> (If this application is being taken orally, this preceding statement should be read prior to asking any question concerning income). | Are any assets pledged other than as described on Schedules? If so, describe. |
| TOTAL INCOME \$ | Income tax settled through (date): |

| Personal Bank Accounts Carried at: | CONTINGENT LIABILITIES |
|------------------------------------|------------------------|
|------------------------------------|------------------------|

| | |
|--|--|
| | Do you have contingent liabilities? If so, describe: |
| | Endorser, co-maker or guarantor? |
| | On leases or contracts? |
| | Legal claims? |
| Are you a defendant in any suits or legal actions? | Other special debt? |
| Have you been declared bankrupt in the last 14 years? <input type="checkbox"/> Yes <input type="checkbox"/> No | Total Contingent Liabilities: \$ |

Schedule A – Stocks & Bonds - Listed

| No. of Shares or Par Value of Bonds | Description | Issued In Name Of | Cost | Market Value |
|-------------------------------------|-------------|-------------------|---------------|--------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | Total: | |

Schedule B – Stocks & Bonds - Unlisted

| No. of Shares or Par Value of Bonds | Description | Issued In Name Of | Cost | Market Value |
|---|-------------|-----------------------|------|--------------|
| | | | | |
| | | | | |
| | | | | |
| Are you aware of any restrictions dealing with the transfer or sale of the above securities? <input type="checkbox"/> Yes <input type="checkbox"/> No | | If yes, give details: | | |
| Are any of your stocks or bonds in joint tenancy, tenancy in common or community property? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |

Schedule C – Real Estate

| Legal Description & Address (also give brief physical description) | Title in Name Of | Cost | Market Value | Trust Deed, Mortgage or Other Liens | | |
|---|------------------|------|---|-------------------------------------|-----------------|---------|
| | | | | Unpaid Balance | Monthly Payment | Held By |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Total | | \$ | \$ | \$ | \$ | |
| Is any of the above Real Estate subject to declaration of homestead? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | Is any of your real property held in joint tenancy, tenancy in common or community property? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Are you leasing any Real or Personal Property? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | If yes, give details as to terms of leases: | | | |

Schedule D – Insurance

| Name of Company | Owner of Policy | Beneficiary | Face Amount | Policy Loans | Cash Surrender Value |
|-----------------|-----------------|-------------|-------------|---------------|----------------------|
| | | | | | |
| | | | | | |
| | | | | Total: | |

Schedule E – Other Debts

| Notes and Accounts Owed To | Current Amount | Payment | Description of Security Pledged |
|----------------------------|----------------|---------|---------------------------------|
| | | | |
| | | | |
| | | | Total: |

ADDITIONAL INFORMATION:

| | |
|---|-----------------------|
| Have you ever failed in business or compromised debts with your creditors? <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, give details: |
| Are any of your assets pledged, or in any other manner unavailable for paying debts? <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, give details: |
| Are there any suits, judgments and/or executions of attachments against you pending? <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, give details: |

The information contained in this statement is provided for the purpose of obtaining or maintaining credit with you on behalf of the undersigned or persons, forms or corporations in whose behalf the undersigned may either severally or jointly with others execute a guaranty in your favor. Each undersigned understands that you are relying on the information provided herein (including the designation made as to ownership of property) in deciding to grant or continue credit. Each undersigned represents and warrants that the information provided is true and complete and that you may consider this statement as continuing to be true and correct until a written notice of a change is given to you by the undersigned. You are authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein and to determine my and/or our creditworthiness. You are authorized to answer questions about your credit experience with the undersigned. The undersigned acknowledge(s) receipt of a copy of this instrument.

Signature (Individual) _____

PRINTED NAME

Date: _____, 20____ *Signature (Other Party)* _____

PRINTED NAME