

PERSONAL FINANCIAL STATEMENT

Individual Name and Address _____ _____ _____	SAVANNA-THOMSON STATE BANK 302 MAIN STREET SAVANNA, IL. 61074	Joint Party Name and Address _____ _____ _____
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INDIVIDUAL INFORMATION	JOINT PARTY INFORMATION
Occupation (or Business) _____	Occupation (or Business) _____
Primary Employer's Name _____	Primary Employer's Name _____
Employer Address _____	Employer Address _____
Primary Phone _____ Alt. Phone _____	Primary Phone _____ Alt. Phone _____
Email: _____	Email: _____

ASSETS	Complete SCHEDULES first	LIABILITIES
Cash On Hand and in Banks	Sched. A \$	Notes Due to Banks
Cash Value of Life Insurance	Sched. B \$	Notes Due to Relatives and Friends
U.S. Gov't. Securities	Sched. C \$	Notes Due to Others
Other Marketable Securities	Sched. C \$	Accounts and Bills Payable
	\$	Loans on Life Insurance Policies
	\$	Contract Accounts Payable
	\$	Cash Rent Payable
TOTAL LIQUID ASSETS	\$	Other Liabilities Due within 1 Year - Itemize
Real Estate Owned	Sched. E \$	
Mortgages and Contracts Owned	Sched. F \$	
Notes and Accounts Receivable - current	Sched. D \$	
Notes and Accounts Receivable - over 90 days	Sched. D \$	TOTAL SHORT TERM LIABILITIES
Notes Due From Relatives and Friends	Sched. D \$	Real Estate Mortgages Payable
Other Securities - Not Readily Marketable	Sched. C \$	Liens and Assessments Payable
Personal Property	Sched. G \$	Other Debts - Itemize
IRA and Tax Deferred Accounts	\$	TOTAL LONG TERM LIABILITIES
Other Assets - Itemize <input type="checkbox"/> (see attached itemization)	\$	TOTAL LIABILITIES
TOTAL PRODUCTIVE ASSETS	\$	NET WORTH (Total Assets Minus Total Liabilities)
TOTAL ASSETS	\$	TOTAL LIABILITIES AND NET WORTH

ANNUAL INCOME	ESTIMATE OF ANNUAL EXPENSES
Salary, Bonuses and Commissions	Income Taxes
Interest and Dividends	Other Taxes
Rental and Lease Income (Net)	Insurance Premiums
Allimony, child support separate maintenance income need not be disclosed unless you want it included in your total income.	Mortgage Payments
Other Income Desc.	Rent Payable
Other Income Desc.	Other Expenses Desc.
Other Income Desc.	Other Expenses Desc.
TOTAL ANNUAL INCOME	TOTAL ESTIMATE OF ANNUAL EXPENSES

GENERAL INFORMATION	CONTINGENT LIABILITIES
Are any Assets Pledged Other Than Described on SCHEDULES <input type="checkbox"/> Yes <input type="checkbox"/> No	As Endorser, Co-maker or Guarantor <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a Defendant in Any Suits or Legal Actions? <input type="checkbox"/> Yes <input type="checkbox"/> No	On Leases or Contracts <input type="checkbox"/> Yes <input type="checkbox"/> No
Indicate Date of Last Income Tax Return Filed with IRS: _____	For Legal Claims <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been declared Bankrupt in the last 10 years? <input type="checkbox"/> Yes <input type="checkbox"/> No	For Federal and State Income Taxes <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a Partner, Member or Officer in any other venture? <input type="checkbox"/> Yes <input type="checkbox"/> No	For Other _____

SCHEDULES					
A CASH IN BANKS AND NOTES DUE TO BANKS (List all Real Estate Loans in Schedule E)					<input type="checkbox"/> Additional Information Requested
NAME OF BANK	Type of Account	Type of Ownership	On Deposit	Notes Due Banks	Collateral (if Any) and Type Of Ownership
			\$	\$	
			\$	\$	
			\$	\$	
			\$	\$	
			\$	\$	
		Cash On Hand	\$	\$	
<input type="checkbox"/> See Attached Itemization			TOTAL	\$	

B LIFE INSURANCE (List only those Policies that you own)					
INSURANCE COMPANY	Face Of Policy	Cash Surrender Value	Policy Loan From Insurance Co.	Other Loans (Policy As Collateral)	BENEFICIARY
	\$	\$	\$		
	\$	\$	\$		
	\$	\$	\$		
<input type="checkbox"/> See Attached Itemization			TOTAL	\$	\$

C SECURITIES OWNED (Including U.S. Gov't Bonds and all other Stocks and Bonds)							
No. Of Shares	DESCRIPTION (Also Indicate if Not Registered in Your Name)	Type of Ownership	COST	Market Value U.S. Gov. Sec.	Market Value Marketable Sec.	MARKET VALUE Not Readily Marketable	Amount Pledged To Secured Loan
			\$	\$	\$	\$	\$
			\$	\$	\$	\$	\$
			\$	\$	\$	\$	\$
			\$	\$	\$	\$	\$
			\$	\$	\$	\$	\$
<input type="checkbox"/> See Attached Itemization			TOTAL	\$	\$	\$	\$

D NOTES AND ACCOUNTS RECEIVABLE (Money Payable or Owed to You Individually-Indicate % of your Ownership Interest)							
MAKER/DEBTOR	%	When Due (MM/YYYY)	Original Amount	Balance Due Current Accounts	Balance Due Over 90 Days	Bal. Due Notes Rel. and Friends	Secured by (if any)
			\$	\$	\$	\$	
			\$	\$	\$	\$	
			\$	\$	\$	\$	
			\$	\$	\$	\$	
<input type="checkbox"/> See Attached Itemization			TOTAL	\$	\$	\$	

E REAL ESTATE OWNED (Indicate % of your Ownership Interest)									
TITLE IN NAME OF	%	Description and Location	Acquired (MM/YYYY)	Original Cost	Present Value of Real Estate	Amount of Ins. Carried	MORTGAGE OR CONTRACT PAYABLE		
				\$	\$	\$	Bal. Due	Payment	Maturity (MM/YYYY)
				\$	\$	\$	\$	\$	
				\$	\$	\$	\$	\$	
				\$	\$	\$	\$	\$	
				\$	\$	\$	\$	\$	
<input type="checkbox"/> See Attached Itemization			TOTAL	\$	\$	\$	TOTAL	\$	

F MORTGAGES AND CONTRACTS OWNED (Indicate % of your Ownership Interest)								
Cont.	Mtg.	%	Mortgagor/Vendor (Name/Address)	PROPERTY COVERED	Instrument (MM/YYYY)	Payment	Maturity (MM/YYYY)	Balance Due
						\$		\$
						\$		\$
						\$		\$
<input type="checkbox"/> See Attached Itemization			TOTAL			\$		\$

G PERSONAL PROPERTY (Indicate % of your Ownership Interest)							
DESCRIPTION	%	When New (MM/YYYY)	Cost When New	Value Today	LOANS ON PROPERTY		
					Balance Due	To Whom Payable	
			\$	\$	\$		
			\$	\$	\$		
			\$	\$	\$		
<input type="checkbox"/> See Attached Itemization			TOTAL	\$	\$		

H NOTES AND ACCOUNTS PAYABLE							
PAYABLE TO	Other Obligors (if Any)	When Due (MM/YYYY)	Notes Due To Rel. and Friends	Notes Due "Others" (Not Banks)	Accounts and Bills	Contracts Payable	Secured by (if any)
			\$	\$	\$	\$	
			\$	\$	\$	\$	
			\$	\$	\$	\$	
<input type="checkbox"/> See Attached Itemization			TOTALS	\$	\$	\$	

The information contained in this Financial Statement (and its accompanying schedules, if any,) is supporting documentation to an application for new or existing credit, renewal or refinancing for me or for others. I acknowledge that my representations made in this Financial Statement will be relied on by you, as Creditor, in your consideration of the application for credit and your decision process. I warrant that this Financial Statement is true and correct in every detail and accurately represents my financial condition on the date signed below. I authorize you to make all inquiries you deem necessary to verify the accuracy of the information contained in this Financial Statement and to determine my creditworthiness. I will promptly notify you of any subsequent changes which would affect the accuracy of this Financial Statement. I am aware that any knowing or willful false statements or information on this Financial Statement can be a violation of federal law 18 U.S.C. sec. 1014 and may result in criminal prosecution leading to imprisonment, a fine, or both.

I declare that I have read and understand the statements above.

Date Signed _____ Signature _____ Signature _____ (If applicable for Joint Party)