

## Personal Financial Statement

Submitted to: <b>GREAT S</b>	OUTHERN E	BANK					Date:			
Section 1-Individua	al Informatio	n (Type or Prin	it)	;	Section	2-Other Par	ty Information	า (Ty	pe o	r Print)
Name		` • •	,	Name						•
Address		Addre	ss							
City, State, Zip				City, S	State, Zip					
Social Security #				Social	Security #					
Date of Birth				Date o	of Birth					
Position or occupation				Positio	on or occup	ation				
Business name				Busine	ess name					
Business address				Busine	ess address	S				
City, State, Zip				City, S	State, Zip					
Length at present address				Length	n at presen	t address				
Length of employment				Length	n of employ	ment				
Residential phone				Reside	ential phone	e				
Business phone				Busine	ess phone					
Section 3-Statement of F	inancial Con	dition as of				, 20				
	Assets	<u></u>	In do	llare			abilities			In dollars
(Do not include a		l value)	(omit			Lic		(omit cents)		
Cash, Checking and Savings			(		Notes pay	yable to banks a	(			
U.S. Govt and marketable se	curities-see Sch	edule B			Due to br	okers				
Non-marketable securities-se	e Schedule C				Amounts	payable to othe				
Securities held by broker in m	nargin accounts				Amounts	payable to othe				
Restricted, control or margin	account stocks				Accounts	and bills due				
Real estate owned-see Schee			Unpaid in	come tax						
Accounts, loans, and notes re			Other unp	paid taxes and i	nterest					
Automobiles			Real estate mortgages payable-see Schedules D8							
Cash surrender value-life insi	urance-see Sch	edule E					its, credit cards, e			
Vested interest in deferred co	mpensation/pro	fit-sharing								
Plans-see Schedul		Ŭ			Total Lia	bilities				
Business ventures-see Scheo	dule G									
Other assets/personal property	itemize-see Sch	edule G if applicable			Net Wort	h				
Total Assets					Total Lia	bilities and Ne	t Worth			
Section 4-Annual Incor Ended:	ne For Year	Annual	Expen	diture	es	Conti	ngent Liabilit	ies		Estimated Amounts
Salary, bonuses & commissions		Mortgage/rental paym	ents			Do you have any Yes N				
Dividends & interest		Real estate taxes & assessments					ties (as endorser,			
Real Estate Income		Taxes-federal, state, a	and local			co-maker or gua				
Other income alimony, child support or		Insurance payments				On leases? On o	,			
eparate maintenance income		Other contract payme	nts			Involvement in pending legal actions?				
eed to be revealed if you do not	if you do not (car payments, charge cards,					actions? Contested and/or unsatisfied				
vish to have it considered as a a sais for repaying this				income tax leins						
bligation.)		Alimony, child support	t			Any estimated ca				
		maintenance				Have you ever			-	
		Other expenses				Declared bankru Been audited by				
						Deen addited by	uio iito:			
						If "yes" to any q	uestion(s) describe:			
		Total Evnon	dituras			Tota				

					Type of A		S ACCOUN			CATE	S OF	DEPO						TC.	Balance
Name of Financial Institution Type of					Type of A	Account Owner						(3)			Pledged, to Whom?				Balance
		U.S.	GOVE	RNME	ENT AND	MARKE	TABLE S	ECURI	ΓΙΕS (U						ry)	1			
Number of shares or Face Value of Bonds  Description			n	In Name of					Are these Registered, Pledged or Held by Others?			Ma	Market Value Exch				Where Traded		
-																			
0011501				· ^	DI E 0501														
Number of Description					1					cessar Are thes	• •	stered,		Value Me				.f. Valuation	
Shar	Shares Description		)TI	In Name of				Pledged or Held by Others?			value			Method of Valuation					
SCHEDU	JLE D -	·INVE	STME	NTS I	IN REAL E	STATE	(Use add	itional	sheet i	f nec	essarv	<i>(</i> )							
Descripti	ion/Loca				ate of Orig	inal	% Owned by You	Market Valu Your % o		ue of Pre		esent Balance		Monthly Payment		Mortgage Maturity		Mortgage Owed To	
	estment	е			esimeni/An	iouni			vestme					Pa	Payment		ate		
											+								
			INICHI		E CARRIE	.D II.	LIDING		INCLIC	A 5.10	<u> </u>			1		1		<u> </u>	
Name of					E CARRIE of Policy	D, INC	Beneficia		INSUR		e Amo	unt	F	Policy	Loans		Cash	Sur	render Value
Cor	Company			Relationship															
SCHEDI	ULE F –	VEST	LED IN.	TERE	ST IN DE	FERRE	D СОМРЕ	NSATIO	ON/PRO	OFIT-	-SHAR	ING P	LANS						
%	% Company Name Ad		Acco	ount Manner of Payout					Distribution			Вє	Beneficiary			Amount			
Vested					Num	ibei	(Annuity	y, Lump	Sum, e	e(C)	Da	ie							
	JLE G -			VEN	TURES (U	se addi	itional she	et if ne	cessar	y)	_								1
any Bu	usiness	Ventu	re in	Do	Your osition/Title		oo of Busin	2000	Years	s in		tal Ass		You	% of	Net	Worth	of	Present Net Value of Your
which You are a Princip Partner		rincipal or in Business		Line of Busine		1622	Busin		LISIE	ed in Section 3		Ownership		В	Business		Investment		
				1															
				1							1								
			NS OW		BANK, BR Date of O			E COM Present		S, A	ND OT		(MASTE		RD, VI		TC.)		
Owing t	to (Acct	No)	(J)		Borrowing/	•		Balance			ue	Payment							Secured by
			1																
			1																
							- 11				··							41-	
undersign	ed. The	under	signed	ackno	wledges an	d unders	tands that	you are	relying o	on the	e inform	ation p	rovided h	erein i	n decidi	ng to g	grant or	conti	upon the guaranty of nue credit or to accep
																			and gives a correct a sis statement, and (3) le
																			ned agrees to notify in this statement or (2)
the financ	ial condit	ion of a	any of th	e und	ersigned or	(3) in the	ability of an	ny of the	undersig	gned t	to perfor	m its (c	r their) ob	oligatio	ns to you	u. In th	ne absen	ice of	such notice or a new a
accuracy	of the inf	formati	on conta	ained I	herein, and	to deterr	nine the cre	edit-worth	niness of	f the i	undersig	gned ar	nd the und	dersigr	ned here	by autl	horizes a	all pe	n necessary to verify rsons of whom you ma
					Each of the ents, warr											i the ur	naersign	ed.	
Doto oice	nod	_			0.0		Signature												
Date sigi	nea				, 20	' —	oignature												
Date sign	ned				20	1	Signature												
Date Sigi	cu				, 20		oignature												