IMPORTANT: READ THESE DIRECTIONS BEFORE COMP If you are applying for individual credit in your name a another person as the basis for repayment of the cree If you are applying for joint credit with another person applicant. If you are applying for individual credit, but are relying income or assets of another person as a basis for rep in Section 2 about the person on whose alimony, chil If this statement relates to your guaranty of the indeb	Rolling Hills Bank & Trust		
(SECTION 1) INDIVIDUAL INFORMATION	١	(SECTION 2) OTHER PARTY INFORMA	TION
Name:		Name:	
Address:		Address:	
City/State/Zip:		City/State/Zip:	
Phone:		Phone:	
D.O.B:		D.O.B:	
Soc. Sec.#:		Soc. Sec.#:	
Occupation:		Occupation:	
(SECTION 3) STATEMENT OF FINANCIA	L CONDITION AS OF (DA	NTE):	
ASSETS		LIABILITIES	
Cash, Savings, CDs on hand		(E) Miscellaneous Debts	
Accounts Receivable		Notes Payable	
Furniture & Fixtures		Unpaid Taxes	
(A) US Govt. Marketable Sec.		Accounts Payable	
(B) Non-Marketable Sec.		(D) Policy Loans	
(C) Real Estate		(C) Real Estate Mortgages	
(D) Cash Value Life Insurance		(C) Real Estate Mongages	
TOTAL ASSETS		TOTAL LIABILITIES NET WORTH TOTAL LIAB. & NET WORTH	
INCOME FOR YEAR ENDED		CONTINGENT LIABILITIES	
Salary, Bonuses, & Comm.		DO YOU HAVE ANY CONTINGENT	
Social Security		LIABILITIES? DESCRIBE ENDORSER	
Loss Carryover		CO-MAKER, GUARANTOR?	
Business Income			
		Leases or Contracts?	
		Legal Claims?	
		Other Special Debt?	
		Guarantee Debt of Corp.	
TOTAL INCOME		TOTAL CONT. LIABILITIES	
SCHEDULE A - U.S. GOVERNMENT & MA	ARKETABLE SECURITIES	S	
No. of Shares Description	In Name of	Price/Share Plede	ged? Mrkt. Value
		TOTAL	
SCHEDULE B - NON-MARKETABLE SEC	URITIES		
No. of Shares Description	In Name of	Price/Share Pledg	ged? Mrkt. Value
		TOTAL	
SIGNATURE (INDIVIDUAL)	DATE	SIGNATURE (OTHER PARTY)	DATE

Personal Financial Statement

Personal Financial Statement



SCH	EDULE C - REAL	ESTATE OWNED						
	Address		Title In Name of	Date Acquired	Mrkt. Value	Maturity	Mtg. Amt.	
				TOTAL				
SCH		NSURANCE CARRIE	D, INCLUDING GROUP INSURANC	:F				
0011	Name of Com.	Owner of Policy	Beneficiary	Face Amt.	Policy Loans	Pledged?	Cash Value	
			Denondary	1 000 /		. lougoui		
			TOTAL					
SCH	EDULE E - OTHE	RDEBIS			Ourse at Arest		Deursente	
	Notes/Accts.				Current Amt.		Payments	
				TOTAL				
ADDI	TIONAL PERSONA	L INFORMATION						
)	nome of everyter?					
	Do you have a will	! If SO,	name of executor?					

Do you have a will:	in so, hame of excedents				
Are you a partner/officer in any venture? If so, describe.					
Do you pay child support, alimony, or separate maintenance? If so, describe.					
Income Tax settled through (DATE).					
Are you a defendant in any lawsuit?					
Have you ever been declared bankrupt in the last 14 years?					
Personal bank accounts carried at:					

The information contained in this statement is provided for the purpose of obtaining, or maintaining credit with you on behalf of the undersigned, or person(s), firm(s), or corporation(s) 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 answer questions about your credit experience with us. The undersigned acknowledge(s) receipt of a copy of this statement.

SIGNATURE (INDIVIDUAL)