Region 10 League for Economic Assistance and Planning, Inc.
300 N Cascade Ave Suite 1
Montrose CO 81401

PERSONAL FINANCIAL STATEMENT

SECTION 1

AMOUNT REQUESTED: $ | **LOAN PURPOSE:**

STATEMENT OF CONDITION AS OF ________________________, 20___ (Date)

Name: ______________	Name of Spouse or Registered Partner: ______________
Social Security Number: ______________ Date of Birth: ________	Social Security Number: ______________ Date of Birth: ________
Residence Address: ______________ No. of Yrs.: ______	Residence Address: ______________ No. of Yrs.: ______
City/State/ZIP: ______________	City/State/ZIP: ______________
Residence Phone: ______________	Residence Phone: ______________
Employer Name: ______________ No. of Yrs.: ______	Employer Name: ______________ No. of Yrs.: ______
Employer Address: ______________	Employer Address: ______________
Business Phone: ______________	Business Phone: ______________
E-mail address: ______________	E-mail address: ______________

SECTION 2

ASSETS	*(Omit cents)*	**LIABILITIES**	*(Omit cents)*
Cash on Hand and in Banks: (List Institutions)	$	Accounts Payable (List Accounts including Credit Cards):	
IRA or Other Retirement Accounts	$		
Accounts and Notes Receivable (**Complete Section 4**)	$	Notes Payable to Banks and Others (**Describe in Section 11**)	$
Life Insurance - Cash Surrender Value Only (**Complete Section 5**)	$	Loan on Life Insurance	$
Stocks and Bonds and Other Securities (**Complete Section 6**)	$	Unpaid Taxes (**Describe in Section 12**)	$
Real Estate (**Complete Section 7**)	$	Mortgages on Real Estate (**Describe in Section 7**)	$
Automobile - Present Value	$	Installment Account (Auto) Mo. Payments $ _____	$
Other Personal Property (**Complete Section 8**)	$	Installment Account (Other) Mo. Payments $ _____	$
Partnerships/ LLC's (**Complete Section 9**)	$	Other Liabilities (**Describe in Section 13**)	$
Other Assets (**Complete Section 10**)	$	**TOTAL LIABILITIES**	$ 0
TOTAL ASSETS	$ 0	**Total Assets less Total Liabilities = NET WORTH**	$ 0

REGION

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SECTION 3

SOURCE OF INCOME		CONTINGENT LIABILITIES	
Salary (Annual)	$	As Endorser or Co-Maker	$
Net Investment Income	$	Legal Claims and Judgments	$
Real Estate Income	$	Provision for Federal Income Tax	$
Other Income (Describe below)*	$	Other Special Debt	$

Description of Other Income in Section 3. Please describe any recurring income not reflected on previous tax returns.______

*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

SECTION 4 ACCOUNTS AND NOTES RECEIVABLE

Name of Debtor	Address	Collateral Description	Lien Position	Equity Value	Payment Terms	Amount	Maturity Date	Current Unpaid Balance

SECTION 5 CASH SURRENDER LIFE INSURANCE HELD (Give face amount and cash surrender value of policies- name of insurance and beneficiaries)

SECTION 6 STOCKS AND BONDS (use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Number of Shares	Number of Securities	Cost	Market Value Quotation Exchange	Date of Quotation Exchange	Total Value

SECTION 7 REAL ESTATE (List each parcel separately. Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C
Type of Property (SFR, etc.)			
Address of Property			
Name of Property Owner			
% of Ownership			
Date Purchased			
Original Cost			
Current Market Value			
Name of Lender/Address			
Loan Number			
Current Loan Balance			
Interest Rate			
Loan Maturity Date			
Monthly Rent Income			
Monthly Payment (Princ. & Int.)			
Status of Loan (Current or Past Due)			

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SECTION 8 OTHER PERSONAL PROPERTY (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment, and if any delinquent, describe delinquency)

SECTION 9 CORPORATIONS, PARTNERSHIPS and LLCs

Name	Date of Initial Investment	Percent Owned	Cost	Current Market Value	Obligations Due	Due Date
		%				
		%				
		%				
		%				

SECTION 10 OTHER ASSETS (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment, and if any delinquent, describe delinquency)

SECTION 11 NOTES PAYABLE TO BANK AND OTHERS (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Name and Address of Note Holder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

SECTION 12 UNPAID TAXES (Describe in detail as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

SECTION 13 OTHER LIABILITIES (Describe in detail)

SECTION 14

Please certify and sign below

Signature ________________________ Date ____________

Signature of borrowing spouse (If you are applying for credit jointly) ________________________ Date ____________

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Borrowers' Certification and Authorization

CERTIFICATION: The Undersigned certify the following: 1. I/We have applied for a commercial loan through the Region 10 Business Loan Fund. In applying for the loan, I/We completed a loan application containing various information on the purpose of the loan, the amount and source of the down payment, employment and income information, and the assets and liabilities. I/We certify that all of the information is true and complete. I/We made no misrepresentations in the loan application or other documents, nor did I/We omit any pertinent information. 2. I/We understand and agreed that the Region 10 Business Loan Fund reserves the right to change the loan review processes to a full documentation program. This may include verifying the information provided on the application with the employer and/or the financial institution. 3. I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements when applying for this loan, as applicable under the provisions of Title 18, United States Code, Section 1014. 4. I/We agree to for all fees incurred during the loan process including, but not limited to, fees for lender, appraisal, title insurance, land surveys, environmental surveys; along with all agree to origination fees payable to the Region 10 Business Loan Fund for the service of placing the loan.

AUTHORIZATION TO OBTAIN INFORMATION: To Whom It May Concern: 1. I/We have applied for a commercial loan through the Region 10 Business Loan Fund. As part of the application process, the Region 10 Business Loan Fund, may verify information contained in my/our loan application and in other documents required in connection with the loan, either before the loan is closed or as part of its quality control program. 2. I/We authorize you to provide to the Region 10 Business Loan Fund and to any lender with whom the Region 10 Business Loan Fund may collaborate on this loan, any and all information and documentation that they request. Such information includes, but is not limited to, employment history and income; bank, money market and similar account balances; credit history; credit reports; and copies of income tax returns. 3. The Region 10 Business Loan Fund or any lender with whom the Region 10 Business Loan Fund may collaborate on this loan may address this authorization to any party named in the loan application. 4. A copy of this authorization may be accepted as an original.

________________________ ______________________________

Borrower Signature Co-Borrower Signature

Date: _________20___ Date:_________20___