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Applicant or Indemnitor's Personal Financia	al Statement Co	mpany				
Name:	·					
Full Name:		SSN:				
Spouse's Full Name:		SSN:				
Home Address:						
I make the following statement of all my ass			,,			
and give other material information for the purp	_	-				
(PLEASE ANSWER ALL	QUESTIONS "I	NO" OR "NONE" WHERE NECESSARY)				
ASSETS		LIABILITIES AND NET WO	ORTH			
Cash (See Sched. No. 1)		Notes Payable to Banks, Unsecured				
On hand and unrestricted in banks.		Direct borrowings only. (See Sched. No.	1)			
US Government Securities		Notes Payable to Banks, Secured Direct borrowings only. (See Sched. No.	1)			
Accounts and Loans Receivable		(00000000000000000000000000000000000000				
(See Sched. No. 2)		Notes Payable to Others, Unsecured				
Notes Receivable, Not Discounted		Notes Dayable to Others, Segured				
(See Sched. No. 2) Notes Receivable, Discounted		Notes Payable to Others, Secured Loans Against Life Insurance				
With banks, finance companies, etc. (See Sched. No. 2)		(See Sched. No.	2)			
Life Insurance, Cash Surrender Value						
(Do not deduct loans) (See Sched. No. 3) Other Stocks and Bonds		Accounts Payable				
(See Sched. No. 4)		Interest Payable				
Real Estate		,				
(See Sched. No. 5)		Taxes and Assessments Payable				
Automobiles Registered in Own Name		Mortgages Payable on Real Estate (See Sched. No.	5)			
Other Assets (Itemize)		Other Liabilities (Itemize)				
IRA or Keough Accounts						
IIIA di Nedugii Accounta						
		Net Worth	\$			
Total Assets	\$	Total Liabilities and Net Worth	\$			
SOURCE OF INCOME		PERSONAL INFORMATI	ON			
Salary	\$	Business or Occupation	Age			
Bonus and commissions	\$					
Dividends	\$	Partner or officer in any other venture				
Real Estate Income	\$					
Other Income - Itemize	\$	Married Dependent Children	1			
		Single Other Dependents				
TOTAL	\$					
CONTINGENT LIABILITIES		GENERAL INFORMATION				
As endorser or comaker	\$	Are any assets pledged? Explain:				
On leases or contracts	\$					
Legal claims	\$	Are you defendant in any suits or legal actions?				
Provisions for Federal Income Taxes	\$	Have you ever taken bankruptcy? Explain:				
Other special debt	\$					



SUPPLEMENTARY SCHEDULES

			SUI	PPLEME	NTARY	SC	HEDULES					
No. 1. Banking Relation	S	(A lis	st of all my bar	nk accoun	nts, includ	٠.						
Name and Location of Bank			Cash Balance			Line of Credit Established		Loan Balances Outstanding		How Endorsed, Guaranteed or Secured?		
				\$		\$			\$			
				\$		\$			\$			
				\$		\$			\$			
				\$		\$			\$			
					See next							
No. 2. Accounts, Loans		· ·	_				-	ı			1	
Name and Address of	f Debtor	Amount Owir	ng Age of D	Debt D	escription	of N	Nature of Del	bt	Description	of Security Held	Date Payme	ent Expecte
		\$										
		\$										
		\$										
		\$										
No. 3. Life Insurance.									_	_		
Name of Person Insured Name of Beneficiary		Name of In Co.		Type (Face Amo		Total Cash Surrender Value	Total Loans Against Policy	Amount of Yearly Premium	Is Policy Assigned	
							\$		\$	\$	\$	
						\$		\$	\$	\$		
							\$		\$	\$	\$	
							\$		\$	\$	\$	
No. 4. Other Stocks and	d Bonds,											
Face Value (Bonds) No. of Shares (Stocks) Description	ion of Security	Registe	Registered in Name of			Cost	Present Market Value		Income Received Last Year	To Whom Pledged		
						\$		\$		\$		
						\$		\$		\$		
						\$		\$		\$		
					\$		\$		\$			
No. 5. Real Estate.						cquired Title in Name of					e Mortgage	
No. 5. Real Estate. Description of Pr	operty & Imp	orovements	Date A	Acquired	Т	itle i	n Name of		Cost	Market Valu	ie ivioi	-99-
	operty & Imp	provements	Date A	Acquired	Т	itle i	n Name of		Cost	Market Valu	\$	
	operty & Imp	provements	Date A	Acquired	Т	itle ii	n Name of					-3-3-
	operty & Imp	provements	Date A	Acquired	Т	itle i	n Name of		\$	\$	\$	
	operty & Imp	provements	Date A	Acquired	Т	itle ii	n Name of		\$	\$	\$	
No. 5. Real Estate. Description of Pr	operty & Imp	provements	Date A	Acquired	T	itle ii	n Name of		\$ \$ \$	\$ \$ \$	\$ \$ \$	

Signature	(Seal
Signature	(Seal

Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claims or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.