



**PERSONAL FINANCIAL STATEMENT**

Name: \_\_\_\_\_ Spouse: \_\_\_\_\_  
 Address: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
 \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Telephone: \_\_\_\_\_  
 Social Security # \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_

Business or Occupation:  
 Partner or Officer in any other venture? Yes No  
 Are any assets held in Trust? Yes No If Yes, Submit Trust Document or Abstract of Trust.  
 Have you ever filed for bankruptcy? Yes No Explain if Yes:

For the purpose of procuring and maintaining credit for surety bonds from time to time in any form whatsoever with SureTec Insurance Company (Surety), for claims and demands against the undersigned, the undersigned submits the following as being a true and accurate statement of its financial condition on the following date, and agree that if any change occurs that materially reduces the means or ability of the undersigned to pay all claims or demands against it, the undersigned will immediately and without delay notify the said Surety, and unless the Surety is so notified it may continue to rely upon the statement herein given as a true and accurate statement of the financial condition of the undersigned as of:

**Date:**

**ASSETS**

**LIABILITIES AND NET WORTH**

Cash on Hand and in Banks (Schedule 1)	\$	Notes Payable to Banks – Secured (Schedule 1)	\$
U.S. Government Securities	\$	Unsecured (Schedule 1)	\$
Accounts, Loans and Notes Receivable (Schedule 2)	\$	Notes Payable to Relatives	\$
Cash Surrender Value Life Insurance (Schedule 3)	\$	Accounts and Notes Payable to Others	\$
Other Stocks and Bonds (Schedule 4)	\$	Rents and Interest Due	\$
Real Estate (Schedule 5)	\$	Taxes Due (Schedule 5)	\$
Automobiles – Number ( )	\$	Liens on Real Estate (Schedule 5)	\$
Other Assets (Itemize)	\$	Other Liabilities (Itemize)	\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
		<b>TOTAL LIABILITIES</b>	<b>\$</b>
		<b>NET WORTH</b>	<b>\$</b>
<b>TOTAL ASSETS</b>	<b>\$</b>	<b>TOTAL LIABILITIES AND NET WORTH</b>	<b>\$</b>

**INCOME**

**CONTINGENT LIABILITIES**

Salary	\$	As Endorser or Co-Maker	\$
Bonus and Commissions	\$	On Loans or Contracts	\$
Dividends and Interest	\$	Legal Claims	\$
Real Estate Income	\$	Provisions for Federal Income Tax	\$
		Other Special Debt	\$
<b>TOTAL INCOME</b>	<b>\$</b>		

**INSURANCE COVERAGE**

**COMPARISON OF MONTHLY INCOME AND EXPENSES**

Fire Insurance – Buildings	\$	Net Monthly Income	\$
Household Effects and Autos	\$	Rent or Home Payment	\$
Liability Insurance - Automobiles	\$	Food and Utilities	\$
Personal	\$	Incidentals	\$
General Public	\$	Avg. Amt. Paid on Open Accts.	\$
Other Insurance	\$	<b>TOTAL EXPENSES</b>	<b>\$</b>
		<b>DIFFERENCE BETWEEN INCOME AND EXPENSES</b>	<b>\$</b>



**No. 1 Banking Relations. (A list of all my bank savings and loan accounts.)**

Name and Location	Cash Balance	Amount of Loan	Maturity of Loan	How Endorsed, Guaranteed or Secured
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		

**No. 2 Accounts, Loans and Notes Receivable. (A list of the largest amounts owing to me.)**

Name and Address of Debtor	Amount Owning	Age of Debt	Description or Nature of Debt	Description of Security Held	Date Payment Expected
	\$				
	\$				
	\$				
	\$				
	\$				
	\$				

**No. 3 Life Insurance.**

Name of Person Insured	Name of Beneficiary	Name of Insurance Co.	Type of Policy	Face Amount of Policy	Total Cash Surrender Value	Total Loans Yearly Policy	Amount of Yearly Premium	Is Policy Assigned?
				\$	\$		\$	
				\$	\$		\$	
				\$	\$		\$	

**No. 4 Other Stocks and Bonds.**

Face Value Bonds No. Stock Shares	Description of Security	Registered in Name of	Cost	Present Market Value	Income Received Last Year	If Pledged State to Whom
\$			\$	\$	\$	
\$			\$	\$	\$	
\$			\$	\$	\$	
\$			\$	\$	\$	
\$			\$	\$	\$	

**No. 5 Real Estate. The legal and equitable title to all the real estate listed in this statement is solely in the name of the undersigned, except as follows: \_\_\_\_\_**

Description or Street No.	Type: (Residence, Commercial, Rental Etc.)	Ownership Vesting	Purchase Price	Market Value	Mortgage	Monthly Payment	Monthly Income
			\$	\$	\$	\$	\$
			\$	\$	\$	\$	\$
			\$	\$	\$	\$	\$
			\$	\$	\$	\$	\$
			\$	\$	\$	\$	\$
			\$	\$	\$	\$	\$
			\$	\$	\$	\$	\$
<b>Total:</b>			\$	\$	\$	\$	\$

The undersigned certifies that the information inserted on both pages hereof has been carefully read and is true and correct.

Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

Signature: \_\_\_\_\_  
Date: \_\_\_\_\_