

FOX RIVER STATE BANK

Personal Financial Statement

CHECK ONE OF THE FOLLOWING BOXES. YOU MAY APPLY FOR SEPARATE OR JOINT CREDIT.

SEPARATE CREDIT - Complete Applicant Section with information about yourself. Complete Spouse Section with information about your Spouse ONLY if you are married AND a Wisconsin resident. Provide the correction information to complete the remainder of the form and sign on the reverse side.

JOINT CREDIT WITH SPOUSE - Complete Applicant and Spouse Sections along with the remainder of the form. Applicant and Spouse must both sign on reverse side.

JOINT CREDIT WITH who is not your Spouse. Each of you must complete a separate Financial Statement as if applying for separate credit and submit them together, including completing Spouse Section if you are married and a Wisconsin resident.

FOR MARRIED APPLICANTS RESIDING IN WISCONSIN. The credit being applied for, if granted, will be incurred in the interest of my marriage or family.

Signature _____ Date _____

Applicant			Spouse		
IF YOU ARE A WISCONSIN RESIDENT, INDICATE MARITAL STATUS: <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Legally Separated			___ CHECK SAME, IF DUPLICATE OF APPLICANT INFORMATION ___ Co-Applicant ___ Non-Applicant		
PLEASE PRINT YOUR FULL NAME			PLEASE PRINT YOUR FULL NAME		
DATE OF BIRTH	SOCIAL SECURITY NO.		DATE OF BIRTH	SOCIAL SECURITY NO.	
CURRENT ADDRESS/CITY/STATE/ZIP			CURRENT ADDRESS/CITY/STATE/ZIP		
NO. OF YEARS THERE	COUNTY YOU LIVE IN	HOME PHONE	NO. OF YEARS THERE ___ Same	COUNTY YOU LIVE IN ___ Same	HOME PHONE ___ Same
PREVIOUS ADDRESS/CITY/STATE/ZIP			PREVIOUS ADDRESS/CITY/STATE/ZIP ___ Same		
NUMBER OF DEPENDENTS AND AGES			NUMBER OF DEPENDENTS AND AGES		
CURRENT EMPLOYER	HOW LONG?	BUSINESS PHONE	CURRENT EMPLOYER	HOW LONG?	BUSINESS PHONE
EMPLOYER'S ADDRESS/CITY/STATE/ZIP		POSITION	EMPLOYER'S ADDRESS/CITY/STATE/ZIP		POSITION

Statement of Financial Condition			
ASSETS (Do Not List Assets of Doubtful Value)	List Dollars--omit cents	LIABILITIES	List Dollars--omit cents
Schedule A Cash Equivalent Assets (Cash in Banks, Money Markets, CDs)	(1) _____	Schedule H Notes Payable to Banks - Unsecured	(17) _____
Schedule B U.S.Gov't and Marketable Securities	(2) _____	Schedule H Notes Payable to Banks - Secured	(18) _____
Schedule C Non-Marketable Securities	(3) _____	Schedule H Amounts Payable to Others	(19) _____
Schedule C Restricted or Control Stocks	(4) _____	Margin Loans	(20) _____
Securities Held in Margin Accounts	(5) _____	Credit Cards and Other Revolving Debts	(21) _____
Schedule D Real Estate Owned and Interests in Real Estate Investments	(6) _____	Unpaid Income Tax	(22) _____
Schedule E Limited Partnership Interests	(7) _____	Other Unpaid Taxes or Interest	(23) _____
Loans Receivable	(8) _____	Schedule D Real Estate Mortgages Payable	(24) _____
Autos and Other Personal Property	(9) _____	Schedule F Life Insurance Policy Loans	(25) _____
Schedule F Life Insurance - Cash Value	(10) _____	Other Debts - Itemize:	(26) _____
Retirement Assets	(11) _____	_____	(27) _____
Other Assets - Itemize:	(12) _____	_____	(28) _____
_____	(13) _____	_____	(29) _____
_____	(14) _____	_____	(30) _____
_____	(15) _____	Total Liabilities	(31) 0
TOTAL ASSETS	(16) 0	Net Worth (Total Assets less Liabilities)	(32) 0
		TOTAL LIABILITIES AND NET WORTH	(33) 0

Income and Financial Obligation Information				
Sources of Income for Year Ended:		Monthly Obligations		
	Applicant	Spouse		
Salary	\$ _____	\$ _____	Mortgage or Rental Payment (Include Tax and Insurance Accrual)	\$ _____
Commission Income	\$ _____	\$ _____	Schedule H Notes Payable Banks	\$ _____
Bonuses	\$ _____	\$ _____	Schedule H Amounts Payable to Others	\$ _____
Dividends & Interest	\$ _____	\$ _____	Interest on Margin Loans	\$ _____
Schedule D Net Real Estate Income	\$ _____	\$ _____	Credit Cards (3% of outstanding balance)	\$ _____
Itemize Other Income - Alimony, Child Support or Separate Maintenance Payments Need Not Be Disclosed if Applicant Does Not Wish Them to be Used in Decision to Extend Credit.	_____	_____	Alimony or Child Support	\$ _____
	_____	_____	Insurance Premiums	\$ _____
	_____	_____	Itemize Other Obligations	\$ _____
	_____	_____	_____	\$ _____
	_____	_____	_____	\$ _____
	\$ 0	\$ 0	TOTAL	\$ 0

Guarantees & Other Contingent Liabilities		Personal Information	
Have you or your spouse guaranteed any indebtedness or have any contingent liabilities? ___ No ___ Yes, please describe below.		Do you have a will?	Will last reviewed (year)
TYPE	CREDITOR	Income tax settled thru (year)	
Guarantee	\$ _____	Do you have a trust?	
Leases	\$ _____	___ Revocable ___ Living ___ Marital ___ Family ___ Insurance ___ Charitable	
Legal Claims	\$ _____	Trustee:	
Ltrs. of Credit	\$ _____	Attorney's Name/Firm:	
Other (describe)	\$ _____	Accountant's Name/Firm:	
		Obligations for Alimony, Child Support or Separate Maintenance Payments? If yes, describe.	
		___ No ___ Yes--> ___ Applicant ___ Spouse	
Ever been a debtor in bankruptcy proceedings? If yes, please describe.		Ever been a defendant in any suit or legal action? If yes, please describe.	
___ No ___ Yes--> ___ Applicant ___ Spouse		___ No ___ Yes--> ___ Applicant ___ Spouse	

INSTRUCTIONS FOR INFORMATION TO BE SUPPLIED BELOW:

If married applicants are applying for joint credit, include all assets and liabilities of both spouses. Both spouses must sign this statement. If a married applicant is applying for separate credit or for joint credit with someone other than his/her spouse, include all marital property and all individual property of the applicant spouse, but **DO NOT** include individual property of the other spouse. A married applicant must in every case identify the liabilities of both spouses.

For purposes of this statement:

- Marital property means assets acquired with my or my spouse's income on or after 1-1-86; and
- Individual property means property owned (whether in joint or sole name) by me prior to marriage; prior to establishing residence in Wisconsin, or prior to 1-1-86, however acquired, and property acquired by me by gift of inheritance at any time.

Schedule A - Cash Equivalent Assets

Name of Financial Institution	Type of Account	In the Name of	Balance (Line 1)	Maturity	Are These Pledged?

Schedule B - US Government and Marketable Securities

# of Shares or Face Value (Bonds)	Description--Name of Fund or Security	In Name of	Are These Restricted?	Cost	Market Value (Total Line 2)	Are These Pledged?

Schedule C - Non-Marketable Securities and Restricted or Control Stocks

No. of Shares or Face Value (Bonds)	Description	In Name of	Book Value	Est. Market Value (Line 3 + 4)	Are These Pledged?

Schedule D - Real Estate Owned and Interests in Real Estate Investments

Address and Type of Property	Title in Name of	% of Ownership	Date Acquired	Cost	Market Value (Total Line 6)

Schedule D - Continued

Mortgage Holder	Mortgage Maturity (year)	Mortgage Amt. (Total Line 24)	Monthly Rent income	Mortgage Payment (incl. Tax & Insur. Accruals)	Maint. Expense	Net Rental Income

Schedule E - Limited Partnership Interests

Name of Partnership	Type	Orig. Cash Outlay	Additional Required Contributions	Contingent Liability or Letter of Credit	Est. Market Value (Line 7)	Net Monthly Cash Flow

Schedule F - Life Insurance Carried Including Group Insurance

Name of Insurance Company	Owner of Policy	Beneficiary	Face Amount	Cash Value Life Insur. (Total Line 10)	Policy Loans (Total Line 25)

Schedule G - Disability Insurance Carried

Name of Insurance Company	Owner of Policy	Person Covered	Amount of Coverage	Short/Long Term

Schedule H - Credit Information (excluding Credit Cards and First Mortgage Loans)

Creditor	Credit in Name of	Original Date	High Credit	Current Balance (17-19)	Collateral	Monthly Payment

The information contained in this statement is provided for the purpose of obtaining or maintaining credit with you on behalf of the undersigned, or persons, firms or corporations on whose behalf the undersigned may either severally or jointly with others, execute a guarantee 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 make all inquiries you deem necessary to verify the accuracy of the statements made herein, and to determine my/our credit worthiness. You are authorized to answer questions about your credit experience with me/us.

NOTICE TO MARRIED APPLICANTS RESIDING IN WISCONSIN: No provisions of any marital property agreement, unilateral statement under sec. 766.59, Wis. Stats. or court decree under sec. 766.70 adversely affects the interest of the creditor unless the creditor, prior to the time the credit is granted, is furnished a copy of the agreement, statement or decree or has actual knowledge of the adverse provision when the obligation to the creditor is incurred.

<p>►</p> <p>Signature, Individual</p>	<p>►</p> <p>Signature, Individual</p>
Date	Date

