Blaisdell Bonding & Insurance Services, Inc.

Return by either fax: (714) 674-1921 or email: mblaisdell@blaisdellbonding.com

| PERSONAL FINANCIAL STATEMENT | As of | |
|------------------------------|-------|--------|
| | | (date) |

| Complete this form for: (1) each proprietor, or 10% or more of voting stock and each corpora | | | | | | ockholder owning |
|--|------------------------|---|-------------------|---------------------------|--------------------------------|------------------|
| Name | | | | Business Ph | one | |
| Residence Address | | | | Residence F | Phone | |
| Business Name of Applicant/Borrower | | | | | | |
| ASSETS (Omit Cents) | | | LIABILITIES | | | (Omit Cents) |
| Cash on hands & in Banks | | | Accounts | Payable | | |
| Savings Accounts | | Notes payable to Banks and Others (Describe in Section 2) | | | | |
| IRA or Other Retirement Account | | | Installmer | t Account (Auto) Mo | onthly Payment \$ | |
| Accounts & Notes Receivable | | | Installmen | nt Account (Other) Mo | onthly Payment \$ | |
| Life Insurance- Cash Value Only (Complete s | ection 8) | | Loans on | Life Insurance | | |
| Stocks & Bonds (Describe in Section 3) | | | Mortgage | s on Real Estate (Desc | eribe in Section 4) | |
| Real Estate (Describe in Section 4) | | | Unpaid Ta | axes (Describe in Sec | tion 6) | |
| Automobile(s)—Present Value | | | Other Lia | pilities (Describe in S | ection 7) | |
| Other Personal Property (Describe in Section | 5) | | Total Lia | bilities | | _ |
| Other Assets (Describe in Section 5) | | | Net Wort | h | | |
| | Total | | - | | Total | |
| Section 1. Sources of Income | Contingent Liabilities | | | | | |
| Salary | | | As Endors | ser or Co-Maker | | |
| Net Investment Income | | | Legal Cla | ms & Judgment | | |
| Real Estate Income | | | | for Federal Income Ta | X | |
| Other Income (Describe Below)* | | | Other Spe | cial Debt | | |
| Description of Other Income in Section 1. | | | | | | |
| *Alimony or child support payments need i | | | | | | |
| Section 2. Notes Payable to Bank and Other | | se attacnments 11 igned.) | necessary. Ea | ch attachment must | be identified as a part of tl | us statement and |
| Name & address of Note holder | Original Balance | Current Balance | Payment Amount | Frequency (monthly, etc.) | How secured or End Collater | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| Section 3. Stocks and Bonds Number of Shares | N | ame of Securities | Cost | Market Value Quotation/Exchange | Date of Quotation/Exchange | Total Value |
|--|---------------------|----------------------------|--------------------|------------------------------------|--|----------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Section 4. Real Estate | Owned | | 1 | | | |
| | | Property A | | Property B | Property C | |
| Гуре of Property | | | | | | |
| Name & address Of Title Holder | | | | | | |
| Date Purchased | | | | | | |
| Original cost | | | | | | |
| Present Market Value | | | | | | |
| Name & Address | | | | | | |
| Of Mortgage Holder Mortgage Balance | | | | | | |
| | | | | | | |
| Amount of Payment pe | | | | | | |
| Status of Mortgage (Cu | ırrent-Past Due) | | | | | |
| Section 5. Other Person | nal Property and | Other Assets | | | | |
| | | | | | | |
| | | | | | | |
| Section 6. Unpaid Taxe | A.C. | | | | | |
| Section 6. Onpaid Taxe | 75 . | | | | | |
| | | | | | | |
| | | | | | | |
| Section 7. Other Liabil | ities. | | | | | |
| | | | | | | |
| | | | | | | |
| Section 8. Life Insuran | ce Held. (Face an | nount, cash surrender va | lue, insurance con | pany, and beneficiary) | | |
| | | | | | | |
| | | | | | | |
| creditworthiness. I cer | tify the above and | I the statements contained | | | statements made and to det of the stated date(s). These | |
| made for the purpose of | of qualifying for s | urety bonds. | | | | |
| Signature: | | | Date: | Social Se | curity Number: | |
| | | | | | | |
| Signature | | | Date | Social Sa | curity Number | |

770 S. Brea Blvd #205 Brea, CA 92821 License # 0F27233 www.blaisdellbonding.com