

Nielson, Mosholder & Associates  
 4380 St. Johns Parkway, Suite 110, Sanford, FL 32771  
 1-800-839-6675 Phone: 407-688-9385 Fax: 407-330-3949

**CONFIDENTIAL PERSONAL FINANCIAL STATEMENT AS OF: \_\_\_\_\_**

Name: \_\_\_\_\_ Social Security # \_\_\_\_\_ DOB \_\_\_\_\_

Spouse: \_\_\_\_\_ Social Security # \_\_\_\_\_ DOB \_\_\_\_\_

Residence Address: \_\_\_\_\_ City: \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

The following is submitted for the purpose of procuring, establishing and maintaining credit with you on behalf of the undersigned or persons, firms or corporations in whose behalf the undersigned may either severally or jointly with others execute a guaranty in your favor. The undersigned warrants that this financial statement is true and correct and that you may consider this statement as continuing to be true and correct until a written notice of change is given to you by the undersigned.

ASSETS		LIABILITIES	
Cash on hand and in banks		Notes payable to banks – Secured	
Marketable securities Schedule A		Notes payable to banks – Unsecured	
Non-marketable securities Schedule E		Due to brokers	
Securities held by broker in margin accounts		Amounts payable to others – Secured	
Restricted or controlled stocks		Amounts payable to others – Unsecured	
Partial interest in real estate equities – Schedule D		Accounts & bills due	
Real estate owned Schedule C		Unpaid income tax	
Loans receivable		Other unpaid taxes and interest	
Autos & other personal property		Real estate mortgages payable – Schedule C	
Cash value life insurance Schedule B		List other debts:	
List other assets:			
		<b>TOTAL LIABILITIES</b>	
		<b>NET WORTH</b>	
<b>TOTAL ASSETS</b>		<b>TOTAL LIAB &amp; N.W.</b>	

Are all bad and doubtful assets excluded from this statement? \_\_\_\_\_ If no, explain: \_\_\_\_\_  
 Income taxes are settled through what date? \_\_\_\_\_ Additional assessments \$ \_\_\_\_\_

ANNUAL SOURCES OF INCOME		PERSONAL INFORMATION
Salary, bonus & commission	\$	Do you have a will?
Dividends	\$	Name of executor of will:
Real Estate Income	\$	Are you a partner or officer in any companies:
Other Income	\$	Marital Status:      Dependents:
<b>CONTINGENT LIABILITIES</b>		<b>GENERAL INFORMATION</b>
Do you have any contingent liabilities?		Are any assets pledged?
Details:		Are you a defendant in any suits or legal actions?
As endorser, co-maker or guarantor	\$	Personal bank accounts maintained at:
Legal Claims	\$	Have you ever filed bankruptcy? Explain on a separate sheet.
Other special debt	\$	Have any companies you were an officer of or partner in ever failed or filed bankruptcy? If yes, explain on separate sheet.
Amount of contested income tax liens	\$	

BOND DEPARTMENT (COMPLETE SCHEDULES AND SIGN THE NEXT PAGE)

**SCHEDULE A – U.S. GOVERNMENT AND MARKETABLE SECURITIES**

No. of Shares or Face Value	Description	In the Name of	Market Value

**SCHEDULE B – LIFE INSURANCE CARRIED, INCLUDING GROUP INSURANCE**

Face Amount	Name of Company	Beneficiary	Cash Surrender Value	Loans

**SCHEDULE C – REAL ESTATE OWNED**

Description of Property	Date Acquired	Titled in the name of	Cost	Market Value	Mortgage Amount Due	Maturity

**SCHEDULE D – PARTIAL INTERESTS IN REAL ESTATE EQUITIES**

Location of Property	% ownership	Type	Year Purchased	Market Value	Mortgage Amount	Maturity

**SCHEDULE E – NON-MARKETABLE SECURITIES**

Description of Securities	Number of Shares Owned	Total Value

**SCHEDULE F – NAMES OF BANKS OR FINANCE COMPANIES WHERE CREDIT HAS BEEN OBTAINED**

Name of Bank or finance company	Date	High Credit	Owe Currently	Secured or unsecured

The undersigned certifies that both sides hereof and the information inserted therein has been carefully read and is true, correct and complete. In addition you are authorized to request from any credit reporting agency any information that you may feel necessary in the course of your investigation.

Dated: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

SPOUSE: \_\_\_\_\_

Witness to all signatures \_\_\_\_\_