

To induce company represented by PCL CONTRACT BONDING AGENCY to become surety for the Undersigned,
or to accept Undersigned as an indemnitor, the Undersigned submits the following financial statement

NOTE: This form is to be used for Personal Financial Statements only. **NOT TO BE USED FOR BUSINESS STATEMENTS.**

Name _____ Social Security # _____
 Street Address _____
 City, State, Zip Code _____ Home Phone # _____
 Spouse's Name _____ Social Security # _____

Statement of Financial Condition as of _____, _____

ASSETS	\$	LIABILITIES	\$
Cash, CDs & Money Market Accounts (Schedule 1)		Credit Cards	
US Government & Marketable Securities (Schedule 2)		Accounts & Bills Due	
Accounts, Loans & Notes Receivable (Schedule 3)		Income Taxes Unpaid	
Non-Marketable Securities (Schedule 4)		Other Taxes Unpaid	
Wholly-Owned Real Estate (Schedule 5)		Debt on Wholly-Owned Real Estate (Schedule 5)	
Partially-Owned Real Estate (Schedule 6)		Debt on Partially-Owned Real Estate (Schedule 6)	
Cash Value of Life Insurance (Schedule 7)		Borrowed on Life Insurance (Schedule 7)	
Retirement Accounts (IRAs, 401Ks, etc.)		Real Estate Taxes Unpaid	
Personal Property (Autos, Furnishings, Jewelry, Collectibles, etc.)		Bank Notes Payable – Secured	
Other Assets & Investments (Detail)		Bank Notes Payable – Unsecured	
		Other Notes Payable (Detail)	
		TOTAL LIABILITIES	
TOTAL ASSETS		NET WORTH (TOTAL ASSETS MINUS TOTAL LIABILITIES)	

SCHEDULE 1 – CASH, CDs & MONEY MARKET ACCOUNTS

Where Held	Account Type & Number	Pledged or Allocated? Explain	Amount
Total			

SCHEDULE 2 – US GOVERNMENT & MARKETABLE SECURITIES

# Of Shares	Description	Held in the Name of	Pledged?	Market Value
Total				

SCHEDULE 3 – ACCOUNTS, LOANS & NOTES RECEIVABLE

Name & Address from Whom Due	For What is it Due	Date Issued	Date Due	Amount
Total				

SCHEDULE 4 – NON-MARKETABLE SECURITIES

# Of Shares	Description	Held in the Name of	Pledged?	Source of Value	Value
Total					

SCHEDULE 5 – WHOLLY-OWNED REAL ESTATE

Description of Property	Title in the Name of	Date Acquired	Mortgage Balance	Monthly Payments	Monthly Income	Original Cost	Market Value
Totals							

SCHEDULE 6 – PARTIALLY-OWNED REAL ESTATE

Description of Property	Title in the Name of	Date Acquired	% of Ownership	Mortgage Balance	Monthly Payments	Monthly Income	Market Value
Totals							

SCHEDULE 7 – CASH VALUE OF LIFE INSURANCE

Name of Company	Policy Number	Name of Insured	Beneficiary	Face Value	Cash Value	Amount Borrowed
Totals						

Are you an endorser, guarantor, or indemnitor on any debt or obligation not listed above? Yes No

If yes, please provide details on amounts, debtors, note holders and whether or not you expect to have to honor the obligations: _____

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 in whose behalf the undersigned may either jointly or severally with others, execute a guaranty 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 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. You are authorized to make all inquiries necessary to verify the accuracy of the statements made herein, and to determine my/our creditworthiness. You are authorized to answer questions about your credit experience with me/us.

Signature (Individual) _____

_____ Date Signed

Signature (Spouse) _____

_____ Date Signed