



Commercial Finance Solutions, LLC
 Franchise, Business, Aircraft, and Equipment Financing
 Commercial Mortgages, Insurance, and HR Solutions
 Your One-Stop Solution!

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 (678) 749-7448
 Fax (678) 303-9389

PERSONAL FINANCIAL STATEMENT As of

Complete this form for: (1) each proprietor, or (2) each limited partner who owns 20% or more interest and each general partner, or (3) each stockholder owning 20% or more of voting stock and each corporate officer and director, or (4) any other person or entity providing a guaranty on the loan.

Name	<input type="text"/>	Phone Number	<input type="text"/>
Address	<input type="text"/>	Business Phone	<input type="text"/>
City	<input type="text"/>	State	<input type="text"/>
		Zip Code	<input type="text"/>
Business Name of Applicant / Borrower <input type="text"/>			

ASSETS	LIABILITIES
Cash on hand and in banks <input type="text"/>	Accounts Payable / Credit Cards <input type="text"/>
IRA or Other Retirement Accounts <input type="text"/>	Notes Payable to Banks and Others <input type="text"/>
Accounts & Notes Receivable <input type="text"/>	(Describe in Section 2)
Life Insurance - Cash Surrender Value Only <input type="text"/>	Installment Account (Auto) <input type="text"/>
(Complete Section 8)	Mo. Payments \$ <input type="text"/>
Stocks and Bonds (Describe in Section 3) <input type="text"/>	Installment Account (Other) <input type="text"/>
Real Estate (Describe in Section 4) <input type="text"/>	Mo. Payments \$ <input type="text"/>
Automobile - Present Value <input type="text"/>	Loan on Life Insurance <input type="text"/>
Other Personal Property (Describe in Section 5) <input type="text"/>	Mortgages on Real Estate (Describe in Section 4) <input type="text"/>
Other Assets (Describe in Section 5) <input type="text"/>	Unpaid Taxes (Describe in Section 6) <input type="text"/>
	Other Liabilities (Describe in Section 7) <input type="text"/>
	Total Liabilities <input type="text"/>
Total \$ <input type="text"/>	Net Worth <input type="text"/>

Section 1. Sources of Income	Contingent Liabilities
Salary <input type="text"/>	As Endorser or Co-Maker <input type="text"/>
Net Investment Income \$ <input type="text"/>	Legal Claims & Judgments <input type="text"/>
Real Estate Income <input type="text"/>	Provision for Federal Income Tax <input type="text"/>
Other Income (Describe below)* <input type="text"/>	Other Special Debt <input type="text"/>

Description of Other Income in Section 1.

* Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

Section 2. Notes Payable to Bank and Others.

Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (mthly, etc.)	How Secured or Endorsed Type of Collateral

Section 3. Stocks and Bonds (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed).

Number of Shares	Name of Securities	Cost	Market Value Quote / Exchange	Date of Quotation /	Total Value

Section 4. Real Estate Owned.

	Property A	Property B	Property C
Type of Property			
Location of Property (Street address, City, State & Zip code)			
Name and Address of Title Holder			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Mth / Yr			
Status of Mortgage			

Section 5. Other Personal Property and Other Assets

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Section 6. Unpaid Taxes

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Section 7. Other Liabilities

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Section 8. Life Insurance Held. (Give face amount and cash surrender value of policies - name of insurance company and beneficiaries).

	<u>Name of Insured</u>	<u>Insurance Company</u>	<u>Face Amount</u>	<u>Cash Value</u>	<u>Beneficiary</u>
1.					
2.					
3.					

I authorize SBA / Lender to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General.

Signature	Date:	Social Security Number:	<input style="width: 90%;" type="text"/>
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Signature	Date:	Social Security Number:	<input style="width: 90%;" type="text"/>
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