

**LONG ISLAND SMALL BUSINESS ASSISTANCE CORP  
INDIVIDUAL PERSONAL FINANCIAL STATEMENT**

As of: \_\_\_\_\_

Complete this form if 1) a sole proprietorship by the proprietor; 2) a partnership by each partner; 3) a corporation by each officer and each stockholder with 10% or more ownership; 4) any other person or entity providing a guaranty on the loan.

Name		Residence Phone			
Residence Address					
City, State, & Zip		Bus Phone:			
Business Name of Applicant/Borrower		Cell Phone:			
Email:		Website:			
ASSETS		LIABILITIES			
(Omit Cents)		(Omit Cents)			
Cash on hand & in Banks	\$	Accounts Payable	\$		
Savings Accounts		Notes Payable (to Bk & Others			
IRA		(Describe in Section 2)			
Accounts & Notes Receivable		Installment Account (Auto)			
(Describe in Section 6)		Mo. Payments s			
Life Insurance-Cash		Installment Account (Other)			
Surrender Value Only		Mo. Payments s			
Stocks and Bonds		Loans on Life Insurance			
(Describe in Section 3)		Mortgages on Real Estate			
Real Estate		(Describe in Section 4)			
(Describe in Section 4)		Unpaid Taxes			
Automobile-Present Value		(Describe in Section 7)			
Other Personal Property		Other Liabilities			
(Describe in Section 5)		(Describe in Section 8)			
Other Assets					
(Describe in Section 6)		Total Liabilities			
		Net Worth			
TOTAL	\$	TOTAL	\$		
Section 1. Source of Income		Contingent Liabilities			
Salary	\$	As Endorser or Co-Maker	\$		
Net Investment Income		Legal Claims & Judgments			
Real Estate Income		Provision for Fed Income Tax			
Other Income (Describe)*		Other Special Debt			
*Description of Items Listed 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 <u>total income.</u> )					
Section 2. Notes Payable to Banks and Others					
Name & Address of Noteholder	Original Balance	Current Balance	Payment Amount	Terms (Monthly-etc.)	How Secured or Endorsed-Type of Collateral

**Section 3. Stocks and Bonds: (Use separate sheet if necessary)**

No. of Shares	Names of Securities	Cost	Market Value Quotation/Exchange	Date Amount

**Section 4. Real Estate Owned. (List each parcel separately. Use supplemental sheets if necessary. Each sheet must be identified as supplement to this statement and signed).**

Address-Type of property	Title is in name of	Date Purchased	Original Cost	Present Value	Mortgage Balance	Amount of Payment	Status of Mortgage

**Section 5. Other Personal Property. (Describe, and if any is mortgaged, state name and address of mortgage holder and amount of mortgage, terms of payment, and if delinquent, describe delinquency).**


**Section 6. Other Assets, Notes & Accounts Receivable (Describe)**


**Section 7. Unpaid Taxes. (Describe in detail, as to type, to whom payable, when due, amount, and what, if any, property the tax lie attaches)**


**Section 8. Other Liabilities. (Describe in detail)**


**Section 9. Life Insurance Held (Give face amount of policies-name of company and beneficiaries)**


Lender is authorized to make all inquiries deemed necessary to verify the accuracy of the statements made herein and to determine my creditworthiness. certify the above and the statements contained in the schedules herein are a true and accurate statement of my financial condition as of the date stated herein. This statement is given for the purpose of: (Check one of the following)

- Inducing Federal & State Subsidized Loan Programs to grant a loan as requested in the application, to the firm whose name appears on pre-application and application herein.
- Furnishing a statement of (my) or (our) financial condition, pursuant to the terms of the guaranty executed by me at the same time Federal & State Subsidized Loan Programs granted a loan to the firm, whose name appears herein.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Social Security Number \_\_\_\_\_