

IMPORTANT: Read these directions before completing this Statement.

- If you are applying for individual credit in your own name and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete only Sections 1 and 3.
- If you are applying for joint credit with another person, complete all Sections, providing information in Section 2 about the joint applicant.
- If you are applying for individual credit, but are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as a basis for repayment of the credit requested, complete all Sections, providing information in Section 2 about the person upon whose alimony, support, or maintenance payments or income or assets you are relying.
- If this statement relates to your guaranty of the indebtedness of other person(s), firm(s) or corporation(s), complete Sections 1 and 3.

To: American Bank and Trust Company, N.A.

SECTION 1 - INDIVIDUAL INFORMATION (Type or Print)

SECTION 2 - OTHER PARTY INFORMATION (Type or Print)

Name		Name	
Residence address		Residence address	
City, State & Zip		City, State & Zip	
Position or occupation		Position or occupation	
Business name		Business name	
Business address		Business address	
City, State & Zip		City, State & Zip	
Res. Phone	Bus. Phone	Res. Phone ()	Bus. Phone ()
Driver's Lic #	Expiration:	State:	Driver's Lic #
			Expiration:
			State:

SECTION 3 - STATEMENT OF FINANCIAL CONDITION AS OF:

ASSETS (Do not include assets of doubtful value)	In Dollars (Omit Cents)	LIABILITIES	In Dollars (Omit Cents)
Cash on hand and in banks		Notes payable to banks - secured - see Schedule F	\$ -
U.S. Gov't & Marketable Securities - see Schedule A	-	Notes payable to banks - unsecured - see Schedule F	-
Non-Marketable Securities - see Schedule B	-	Due to brokers	-
Securities held by broker in margin accounts		Amounts payable to others - secured	-
Restricted or control stocks		Amounts payable to others - unsecured	-
Partial interest in real estate equities - see Schedule C	-	Accounts and bills due	-
Real estate owned - see Schedule D	-	Unpaid income tax	-
Loans Receivable	-	Other unpaid taxes and interest	-
Automobiles and other personal property	-	Real estate mortgages payable - see Schedules C and D	-
Cash value-life insurance - see Schedule E	-	Other debts - itemize	-
Other assets - itemize	-		-
	-		-
	-		-
	-		-
	-		-
TOTAL ASSETS	\$ -	TOTAL LIABILITIES	\$ -
		NET WORTH	\$ -
		TOTAL LIABILITIES AND NET WORTH	\$ -

SOURCES OF INCOME FOR YEAR ENDED:

PERSONAL INFORMATION

Salary, bonuses & commissions		Do you have a will? _____ If so, name of executor.
Dividends		
Real estate income		Are you a partner or officer in any other venture? If so, describe.
Other income (Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation)	-	Are you obligated to pay alimony, child support or separate maintenance payments? If so, describe
	-	
	-	Are any assets pledged other than as described on schedules? If so, describe.
TOTAL	\$ -	

CONTINGENT LIABILITIES

If "Yes" to any below, please provide detailed listing of liabilities

Do you guarantee any debts for other entities?		Income tax settled through (date)
As endorser, co-maker or guarantor?		
On leases or contracts?		Are you a defendant in any suits or legal actions?
Legal claims		
Other special debt		Personal bank accounts carried at
Amount of contested income tax liens		
Comments:		Have you ever been declared bankrupt? If so, describe.

Please do not leave any questions unanswered. Use "no" or "none" where necessary.

SCHEDULE A - U.S. GOVERNMENT & MARKETABLE SECURITIES

Number of shares or face value (bonds)	Description	In name of	Are these pledged?	Market value

SCHEDULE B - NON-MARKETABLE SECURITIES

Number of shares	Description	In name of	Are these pledged?	Source of value	Value

SCHEDULE C - PARTIAL INTERESTS IN REAL ESTATE EQUITIES

Address & type of property	Title in name of	% of ownership	Date acquired	Cost	Market value	Monthly payment	Mortgage balance

SCHEDULE D - REAL ESTATE OWNED

Address & type of property	Title in name of	Date acquired	Cost	Market value	Monthly payment	Mortgage balance

SCHEDULE E - LIFE INSURANCE CARRIED, INCLUDING N.S.L.I. AND GROUP INSURANCE

Name of insurance company	Owner of policy	Beneficiary	Face amount	Policy loans	Cash surrender value

SCHEDULE F - BANKS OR FINANCE COMPANIES WHERE CREDIT HAS BEEN OBTAINED

Name of lender	Credit in the name of	Secured or unsecured?	Original date	High credit	Current balance	Monthly payment

(USE ADDITIONAL SCHEDULES IF NECESSARY)

The information contained in this statement is provided for the purpose of obtaining or maintaining credit with American Bank and Trust Company, N.A. 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. Each undersigned understands that the Bank is 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 that the Bank may consider this statement as continuing to be true and correct until a written notice of a change is given to the Bank by the undersigned. The Bank is authorized to make all inquiries it deems necessary to verify the accuracy of the statements made herein, and to determine my/our credit worthiness. The Bank is authorized to answer questions about its credit experience with me/us.

Further note that information requested below is required by U.S. Federal law for the Bank to obtain, verify, and record information that identifies each person (individuals or businesses) who open an account to avoid terrorism and money laundering activities.

Signature (Individual) _____ Signature (Other party) _____

S.S. No. _____ Date of Birth _____ S.S. No. _____ Date of Birth _____

Driver's License # _____ ST _____ Expiration Date _____ Driver's License # _____ ST _____ Expiration Date _____

Date Signed _____ Date Signed _____