

You may apply for an extension of credit individually or jointly with another applicant. This statement and any applicable supporting schedules may be completed jointly by co-applicants if their assets and liabilities can be meaningfully and fairly presented on a combined basis, otherwise separate statements and schedules must be provided. If you are applying for an unsecured individual loan, you do not need to complete any information concerning a co-applicant unless another person will be permitted to use the account or you wish the co-applicant's or other person's income to be relied upon as the basis for repayment. For the purpose of obtaining credit from time to time with the bank, the following statement and information are furnished as complete, true and accurate statement of the final condition of the undersigned on _____.

We intend to apply for joint credit (initial here) Applicant _____ Co-Applicant _____

Round all amounts to the nearest \$100.



| APPLICANT | | | | CO-APPLICANT | | | |
|--|--|---|--|--|--|---|--|
| Full Name | | | | Full Name | | | |
| Street Address | | | | Street Address | | | |
| City | State | Zip | | City | State | Zip | |
| County | | | | County | | | |
| Since | Own <input type="checkbox"/> Yes <input type="checkbox"/> No | Rent <input type="checkbox"/> Yes <input type="checkbox"/> No | | Since | Own <input type="checkbox"/> Yes <input type="checkbox"/> No | Rent <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Previous Address (if less than 5 years at present) | | | | Previous Address (if less than 5 years at present) | | | |
| City | State | Zip | | City | State | Zip | |
| Since | Owned | Rented | | Since | Owned | Rented | |
| Social Security # | Date of Birth | | | Social Security # | Date of Birth | | |
| Phone: Residence | Work | | | Phone: Residence | Work | | |
| Employer | | | | Employer | | | |
| Address | | | | Address | | | |
| Position/Title | Since | | | Position/Title | Since | | |
| Previous Employer | How Long | | | Previous Employer | How Long | | |
| Position/Title | | | | Position/Title | | | |
| Dependants/Include Self | | | | Dependants/Include Self | | | |
| Marital Status* <input type="checkbox"/> Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Separated | | | | Marital Status* <input type="checkbox"/> Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Separated | | | |

* Do not provide this information if your application is for individual, unsecured credit.

| ASSETS | | LIABILITIES | |
|--|--|--|---------------------|
| Cash (Schedule 1) | | Short Term Notes Due Financial Institutions (Schedule 7) | |
| Securities (Schedule 2) | | Short Term Notes Due to Others (Schedule 7) | |
| Life Insurance Cash Value (Schedule 3) | | Credit Accounts and Bills Due (Schedule 8) | |
| Mortgages and Contracts Held by You (Schedule 4) | | Insurance Loans (Schedule 3) | |
| Homestead (Schedule 5) | | Installment Loans and Contracts (Schedule 7) | |
| Other Real Estate (Schedule 5) | | Mortgages on Home (Schedule 5) | |
| Profit Sharing & Pension (Schedule 6) | | Mortgages on Other Real Estate (Schedule 5) | |
| Retirement Accounts, Include IRA Accounts (Schedule 1) | | Taxes | |
| Automobile (Describe) | | Other Liabilities (Describe) | |
| | | | |
| Personal Property | | | |
| Other Assets (Describe) | | | |
| | | | |
| | | Total \$ | |
| Total \$ | | (Total Assets, Less Total Liabilities) | Net Worth \$ |

Please contact your Banker if you need assistance with completing these schedules. Round all amounts to the nearest \$100.

| *ANNUAL INCOME | APPLICANT | CO-APPLICANT | PLEASE ANSWER EACH QUESTION (YES OR NO) | APP | CO-APP |
|---|-----------|--------------|--|---|---|
| Salary | | | Are you a Co-Maker, Endorser, or Guarantor of any other person's debt? | <input type="checkbox"/> Yes | <input type="checkbox"/> Yes |
| Bonuses/Commissions | | | | <input type="checkbox"/> No | <input type="checkbox"/> No |
| Dividends/Interest | | | Are you a defendant in any suit or legal action? | <input type="checkbox"/> Yes | <input type="checkbox"/> Yes |
| Net Real Estate Income | | | | <input type="checkbox"/> No | <input type="checkbox"/> No |
| Income from alimony, child support, or maintenance payments need not be entered unless you want it considered as a basis for repayment. | | | Have you ever gone through bankruptcy or had a judgment against you? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Other (List) | | | Have you made a will? | <input type="checkbox"/> Yes | <input type="checkbox"/> Yes |
| Total \$ | | | | <input type="checkbox"/> No | <input type="checkbox"/> No |

SCHEDULE 1 / CASH, SAVINGS CERTIFICATES AND IRA ACCOUNTS

| Name of Bank or Financial Institution | Type Account | Account Balance |
|---------------------------------------|--------------|-----------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total \$ | | |

SCHEDULE 2 / SECURITIES OWNED

| Par Value or No. of Shares | Description | Registered in Name(s) of | Listed or Unlisted | Current Market Values |
|----------------------------|-------------|--------------------------|--------------------|-----------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total \$ | | | | |

SCHEDULE 3 / LIFE INSURANCE

| Insurance Company | Insured | Beneficiary | Face Value of Policy | Cash Value of Policy | Loans |
|-------------------|---------|-------------|----------------------|----------------------|-------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Total \$ | | | | | |

SCHEDULE 4 / RECEIVABLES DUE TO ME ON MORTGAGES AND CONTRACTS I OWN

| Name of Debtor | Description of Property | First Lien or Second Lien | Date of Maturity | Repayment Terms | Balance Due |
|-----------------|-------------------------|---------------------------|------------------|-----------------|-------------|
| | | | | per | |
| | | | | per | |
| | | | | per | |
| | | | | per | |
| Total \$ | | | | | |

SCHEDULE 5 / REAL ESTATE OWNED

| Property Description | Name of Creditor | Year Acquired | Purchase Price | Mortgage Balance | Date of Maturity | Repayment Type | Current Market Value |
|-------------------------------------|------------------|---------------|----------------|------------------|------------------|----------------|----------------------|
| | | | | | | per | |
| | | | | | | per | |
| | | | | | | per | |
| | | | | | | per | |
| | | | | | | per | |
| | | | | | | per | |
| Insurance Company _____ Agent _____ | | | | | | | Total \$ |

SCHEDULE 6 / PROFIT SHARING AND PENSION

| Name of Institution | Type of Account | Account Balance | Amount Totally Vested | Loans |
|---------------------|-----------------|-----------------|-----------------------|-------|
| | | | | |
| | | | | |
| | | | | |
| Total \$ | | | | |

SCHEDULE 7 / INSTALLMENTS, CREDIT LINES AND NOTES

| Name of Creditor | Collateral | Date of Maturity | Repayment Terms | Balance Due |
|------------------|------------|------------------|-----------------|-------------|
| | | | per | |
| | | | per | |
| | | | per | |
| | | | per | |
| Total \$ | | | | |

SCHEDULE 8 / CREDIT ACCOUNTS, BILLS DUE, ALIMONY/CHILD SUPPORT, DAYCARE, ETC.

| Name of Company | Repayment Terms | Balance Due |
|-----------------|-----------------|-------------|
| | per | |
| | per | |
| | per | |
| | per | |
| Total \$ | | |

You certify the information provided in this statement is true and correct. So long as you owe any sums to the bank, you agree to give the bank prompt written notice of any material change in your financial condition and upon request, you agree to provide the bank with an updated personal financial statement. First National Bank and Trust Company is authorized to retain this personal financial statement whether or not any credit is approved and is further authorized to verify your credit and employment history or any other information in this statement. This application does not oblige the bank to make any loan even if you meet the normal standards the bank considers in determining whether to approve or deny the application.

Applicant's Signature _____

Date _____

Co-Applicant's Signature _____

Date _____