

Personal Financial Statement



2595 Preston Road, Suite 100
Frisco, Texas 75034
(972) 334-0700 or Fax (972) 334-0114

Credit Authorization - Account Requested

We Intend to Apply for Joint Credit:

Individual

Applicant/Guarantor

Joint

Co-Applicant/Guarantor

NAME / APPLICANT		SOCIAL SECURITY #		DATE OF BIRTH
ADDRESS	CITY	STATE	ZIP	HOME PH#
NAME / CO-APPLICANT *		SOCIAL SECURITY #		DATE OF BIRTH
ADDRESS	CITY	STATE	ZIP	HOME PH#
EMPLOYER - APPLICANT	CITY	POSITION	BUSINESS PH#	LENGTH EMPLOYED
EMPLOYER - CO-APPLICANT *	CITY	POSITION	BUSINESS PH#	LENGTH EMPLOYED

* Do not fill in if applying for individual credit

FINANCIAL CONDITION AS OF:

Please do not leave any questions unanswered; Use "No" or "None" where necessary; Omit cents.

ASSETS		COST	VALUE	LIABILITIES	
Cash (Schedule 1)	Checking			Due to Brokers in Margin Accts	
	Savings / CD			Notes Payable (Schedule 8)	Secured
	Other			Unsecured	
Securities (Schedule 2)	Marketables			Accounts Payable (Sched 8)	
	Unlisted			Mortgages Payable (Schedule 5)	Homestead
	Restricted/Controlled Stock				Part. Int. R/E
Accounts Receivable (Schedule 3)				R/E Owned	
Notes Receivable (Schedule 3)				Income Tax	
Cash Value Live Insurance-Net (Schedule 4)				Other Tax	
Real Estate (Schedule 5)	Homestead			Other Liabilities (Itemize)	
	Part. Int R/E			Revolving Accts/Credit Cards	
	R/E Owned			Other	
Oil & Gas Interests (Schedule 6)					
Other Partnership Interests (Schedule 7)					
Other Investment/Business Interests					
Automobiles (#) _____					
Retirement Plans					
Other Assets (Itemize)					
				Total Liabilities	
				\$0	
Total Assets				\$0	\$0
				Total Liabilities & Net Worth	
				\$0	
				\$0	

Please do not leave any questions unanswered; Use "No" or "None" where necessary; Omit cents.

DO YOU HAVE ANY CONTINGENT LIABILITIES?	Amount (\$)	Details
As Endorser / Co-Signer / Guarantor?		
On Lease or Contracts?		
Legal Claims or Judgements?		
In Connection with Partnership Interest?		
Other - (Alimony, Child Support etc.)?		
Total Contingent Liabilities	\$0	



INCOME STATEMENT

** Alimony, child support, or separate maintenance payments need not be included below, unless you desire income from these sources to be considered by the bank in determining your credit worthiness in connection with any request.

Annual Cash Income	Last Year	YTD	Total Projected This Year
Salary or Wages			
Bonus			
Commissions			
Dividend and Interest			
Trust Income			
Rental Income			
Oil & Gas Income			
Sale of Assets			
Equipment Sales/Leases			
Distributions from Partnerships			
Other Income **(see notice above)			
Total Cash Income		\$0	\$0

Annual Cash Expenditures	Last Year	YTD	Total Projected This Year
Mortgage/Rental Payments/Taxes			
Other R/E Taxes/Expenses			
Income Taxes			
Other Payments			
Alimony/Child Support Payments			
Principal & Interest Payments on Notes			
Oil & Gas Expenditures			
Business & Investment Contribution/Expense			
Personal Expenses			
Other Expenses			
Other Expenses			
Total Cash Expenditures		\$0	\$0

Net Cash Flow	\$0	\$0	\$0
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Schedule 1 - Cash					
Financial Institution / Account Names	Checking	Savings	CD's	Other (Specify)	Pledged (yes/no)

Schedule 2 - Stocks & Bonds							
# Shares	Com/Pref	Issuer	Symbol	Mkt Per Share	Value	Liens (Y/N)	Name In

Schedule 3 - Notes & Accounts Receivable							
Payable From	Orig. Date	Orig. \$	Curr. Balance	Payments	Maturity	Purpose/Collateral	

Schedule 4 - Life Insurance					
Company	Face Amount	Cash Surrender or Loan Value	Policy Loan (if any)	Is Policy or Cash Value Assigned?	Name of Beneficiary

Schedule 5 - Real Estate Owned and Related Indebtedness							
Ownership / Address - Location	Market Value	Date Purchased	Monthly Income (if any)	Lienholder	Monthly Pymts	Maturity	Current Balance

Schedule 6 - Oil & Gas / Schedule 7 - Other Partnership Interests						
Ownership / Address - Location	Market Value	Date Purchased	Monthly Income (if any)	Lienholder	Monthly Pymts	Purpose / Collateral (if any)

Schedule 8 - Notes & Accounts Payable						
Payable To	Original Date	Original Amount	Current Balance	Payments	Maturity	Purpose / Collateral (if any)

GENERAL INFORMATION

Are any of the assets listed held in trust or in an estate or in any other name or capacity?

If Yes, please describe:

DO YOU HAVE A WILL?

YES

NO

DO YOU HAVE A TRUST IN YOUR WILL?

YES

NO

IF YES, NAME OF EXECUTOR:

IF SO, NAME OF TRUSTEE:

The above financial supporting schedules, which are submitted for the purpose of establishing, obtaining, and maintaining credit, present a true, complete, and correct statement of my financial condition as of the date shown. THE ASSETS DETAILED ABOVE ARE OWNED SOLELY BY THE UNDERSIGNED UNLESS OTHERWISE DESIGNATED.

I agree to furnish current financial information upon request by the Bank. The Bank is authorized to contact any appropriate third parties for the purpose of verifying any information at any time furnished by me to the Bank, and/or obtaining additional credit bureau information deemed necessary by the Bank. This financial statement and other information furnished shall be the property of the Bank.

SIGNATURE

DATE

SIGNATURE

DATE
