PERSONAL FINANCIAL STATEMENT

U.S. SMALL BUSINESS ADMINISTRATION

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, or (4) any person or entity providing a guaranty on the loan.
Name
Business Phone Residence Address Residence Phone City, State, & Zip Code
Business Name of Applicant/Borrower

ASSETS		LIABILITIES	
Cash on hand & in Banks	$_____	Accounts Payable	$_____
Savings Accounts	$_____	Notes Payable to Banks & Others	$_____
IRA or Other Retirement Account	$_____		
Accounts & Notes Receivable	$_____		
Life Insurance-Cash Surrender Value Only	$_____		
Stocks and Bonds	$_____		
Real Estate	$_____		
Automobile-Present Value	$_____	Installment Accounts (Auto)	$_____
Other Personal Property			
Other Assets			
Net Investment Income			
Real Estate Income			
Other Income (Describe below)*			
Description of Other Income in Section 1.			
(Omit Cents)			

$ Mo. Payments $ Installment Account (Other) $
$ Mo. Payments $ Loan on Life Insurance $
$ Mortgages on Real Estate $
(Describe in Section 4)
$ Unpaid Taxes $
$ (Describe in Section 6) Other Liabilities $
$ (Describe in Section 7) Total Liabilities $
Net Worth $
$ **Total** $

Contingent Liabilities

$ As Endorser or Co-Maker $
$ Legal Claims & Judgments $
$ Provision for Federal Income Tax $
$ Other Special Debt $ *Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)Section 2. Notes Payable to Banks and Others. Original Current Payment Frequency How Secured or EndorsedName and Address of Noteholder(s) Balance Balance Amount (monthly,etc.) Type of Collateral

SBA Form 413 (10-08) **Previous Editions Obsolete**
(tumble)

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 Date of Total ValueQuotation/Exchange Quotation/Exchange
Section 4. Real Estate Owned. (List each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.) Property A Property B Property C
Type of Property
Address
Date Purchased Original Cost Present Market Value
Name &
Address of Mortgage Holder
Mortgage Account Number
Mortgage Balance
Amount of Payment per Month/Year
Status of Mortgage (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms **Section 5. Other Personal Property and Other Assets.** of payment and if delinquent, describe delinquency)
Section 6. Unpaid Taxes. (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)
Section 7. Other Liabilities. (Describe in detail.)
Section 8. Life Insurance Held. (Give face amount and cash surrender value of policies - name of insurance company and beneficiaries)
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 (Reference 18 U.S.C. 1001).
Signature:

Date: Social Security Number:
Signature: Date:
Social Security Number: PLEASE NOTE: The estimated average burden hours for the completion of this form is 1.5 hours per response. If you have questions or comments concerning this estimate or any other aspect of this information, please contact Chief, Administrative Branch, U.S. Small Business Administration, Washington, D.C. 20416, and Clearance Officer, Paper Reduction Project (3245-0188), Office of Management and Budget, Washington, D.C. 20503**. PLEASE DO NOT SEND FORMS TO OMB.**