

Name

## PERSONAL FINANCIAL STATEMENT

1400 Wantagh Avenue, Suite 101 Wantagh, NY 11793 Office: 516-792-3944 | Fax: 516-792-3941

www.centaurinsurance.com mlyons@centaurinsurance.com

As of \_

**Business Phone** 

Residence Address	esidence Address Residence Phone										
City, State, & Zip Code											
Business Name of Applicant/Borrower											
ASSETS	(Omit Cer	nts)		LIA	BILITIES	(Omit Cents)					
Cash on hand & in Banks Savings Accounts IRA or Other Retirement Account Accounts & Notes Receivable Life Insurance-Cash Surrender Value Only (Complete Section 8) Stocks and Bonds (Describe in Section 3) Real Estate (Describe in Section 4) Automobile-Present Value Other Personal Property (Describe in Section 5) Other Assets (Describe in Section 5)	\$ \$	Inst Inst Loa Mor Unp Oth	Accounts Payable \$ Notes Payable to Banks and Others \$ (Describe in Section 2) Installment Account (Auto) \$ 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	\$			T	otal \$_						
Section 1. Source of Income  Salary  Net Investment Income  Real Estate Income  Other Income (Describe below)*  Description of Other Income in Section 1.	\$ \$ \$	As l Leg Pro	Contingent Liabilities  As Endorser or Co-Maker . \$								
*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.  Section 2. Notes Payable to Banks and Others. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)											
Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly,etc.)	How Secure Type of	d or Endorsed Collateral					

the above and the statements contained in the attachments are true and accurate as the stated date(s). These statements are made for the purpose of	Section 3. Stocks	and Bonds. (Use at	ttachments if necessary.	Each attach	ment mu	ist be identified as a	part of this statement	and signed).	
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 Balance Amount of Payment per Month/Year Status of Mortgage Balance Amount of Payment per Month/Year Status of Mortgage Balance Amount of Payment per Month/Year Status of Mortgage Saction 5. Other Personal Property and Other Assets. (Cescribe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms 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/Surety to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certif the above and the statements contained in the attachments are true and accurate as the stated diatole). These etatements are named or the purpose of calciuming a survey bond or guarantesing a loan. I understand FALSE statements may result in forbiture of benefits and possible prosecution by the U. Stormer Central (Perforence 16 U.S.C. 1001).	Number of Shares Name		of Securities	Cost				Total Value	
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 Balance Amount of Payment per Month/Year Status of Mortgage Balance Amount of Payment per Month/Year Status of Mortgage Balance Amount of Payment per Month/Year Status of Mortgage Saction 5. Other Personal Property and Other Assets. (Describe, and if any is pleaged as security, state name and address of lien holder, amount of lien, terms 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 suthorize SBA/Surety to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certif the above and the statementer contained in the attachments are true and accurate as the stated data(e). These dataments are made of the purpose obtaining a survey board or guaranteing a joan. I understand PALSE statements may result in forbiture of benefits and possible prosecution by the U. Attorney General (Reference 18 U.S.C. 1001).									
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Address Date Purchased Original Cost Present Market Value Name & Address of Mortgage Holder Mortgage Account Number Mortgage Account Number Mortgage Balance Amount of Payment per MonthYear Status of Mortgage Section 5. Other Personal Property and Other Assets.  (Describe, and if any is piedged as security, state name and address of lien holder, amount of lien, terms 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 SBASurely to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. Learning the above and the statements contained in the attachments are true and accurate as the stated date(s), These statements are proposed or obtaining a purely bond or guarantheing 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:			Property A			Property B	F	Property C	
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