

SBA LOAN APPLICATION CHECKLIST

IST		Remember to sign and date all documents, and keep a copy for yourself. Documents must be signed and dated within 90 days of submission to the SBA.
S		SBA Loan Application
CHE		Management Profile (Provide one profile and one SBA Form 1919 for each shareholder of 20% or more, as well as each officer, director, member, partner or key employee of the applicant or operating company.)
0		Business Profile
CATI		SBA Form 912 : Statement of Personal History
SBA LOAN APPLICATION CHECKLIST		Personal Financial Statement (Complete one form for each proprietor, each general partner, each limited partner who owns 20% or more interest, each stockholder who owns 20% or more of the voting stock, or any person or entity providing a guarantee on the loan.)
JAN		Personal Budget Analysis (Complete for all individuals filling out the Personal Financial Statement)
Y TO		Business History/Plan
SB/		Business Debt Schedule: This schedule must be dated the same as the interim Balance Sheet and reflect all outstanding liabilities as shown on the Interim Balance Sheet. Please provide copies of all notes that are to be refinanced, if applicable.
		Aging of Accounts Receivables and Payables: Complete if applicable. This form must be dated the same as the Interim Balance Sheet and reflect the AP and AR balances as shown on the Interim Balance Sheet.
		IRS Form 4506-C: Request for Copy of Transcript of Tax Form: Please complete this form for each Borrower, Co-Borrower, and Guarantor on the application. If funds will be used to purchase a business, the seller must also complete Form 4506-C.
		Assumptions to Projections: Please explain the assumptions used to generate projection figures.
		Personal Federal Tax Returns: Copies of last 3 years, signed and currently dated, for individuals owning 20% + of business. ALSO complete IRS Form 4506C for all tax returns for the small business applicant.
		Articles of Incorporation and By-Laws, or Articles of Organization and Operating Agreement, or Filed Partnership Agreement, as well as the Tax ID Number and verification of Trade Name (if applicable).
		ADDITIONAL INFORMATION: Based on the type of loan request, you will need to provide additional information as indicated
	Requ	ests from Existing Business:
		Balance Sheet and Income Statements: For the last 3 consecutive years, signed and dated.
		Business Tax Returns: For the last 3 consecutive years, signed and dated.
		Interim Business Balance Sheet, Income Statement, and Business Debt Schedule Within 60 days, signed and dated with prior year-to-date comparison
		Interim Accounts Receivable & Payable Aging Reports: Same date as interims, signed and dated.
		Detailed Fixed Asset Listing (including make, model, serial #, date of purchase and purchase price).



SBA LOAN APPLICATION CHECKLIST

	Purcha	se of an Existing Business:						
		Purchase Agreement : Signed and dated.						
ğ		Balance Sheets and Income Statements: For last 3 consecutive years, signed and dated.						
爿		Interim Business Balance Sheet and Income Statement: Within 60 days, signed and dated.						
\mathbf{Z}		Business Tax Returns: For last 3 consecutive years, signed and dated.						
		Business Plan						
3		Monthly Income Statement Projection: For the first 2 years, with supporting assumptions, signed and dated.						
Ξ		Opening Day Balance Sheet Projection: Signed and dated.						
APF		Statement of Sale: Written statement from seller giving reason for the sale of the business.						
~		se of or Current Operator of a Franchise Business or any business which operates under a License, ship or Jobber Agreement:						
Ā		Franchise Agreement, dealership, licensing, or jobber						
SB		Franchise Offering Circular						
		Federal Trade Commission (FTC) Franchise Disclosure Statement						
		p or Significant Business Expansion: For businesses less than 24 months old and those that are using the loan proceeds						
	to add a	new product line, open a new office, or support a new large contract, etc., please provide the following:						
		Monthly Income Statement Projection For the first 2 years, with supporting assumptions, signed and dated.						
	닏	Projected Business Balance Sheet (showing changes for new assets, equity, and requested loan)						
	Ш	Business Plan						
	Equipn	nent / Fixed Assets to be used for Collateral:						
	Ш	New Equipment - List of prices/verification of any new equipment to be purchased with loan proceeds						
		Existing Business Assets/Equipment Itemized list of any existing business assets/equipment with make, model, serial number and approximate (where applicable) age for all assets with purchase price greater than \$5,000.						
	Comm	ercial Real Estate Construction:						
		New Construction Copies of Contractors Agreement						
		Plans and Building Specs						
		Preliminary Project Budget and Timeline						
	Real Es	state Purchases:						
	Ш	Real Estate Purchase Contract						
		Earnest Money Agreement/Escrow Agreement (if available)						
- 1		Affiliate Company: Please provide the following if any of the owners of the applicant business owns 20% or more of r company						
Affiliate Company Business Tax Returns For the last 3 years, signed and dated.								
		Affiliate Company Balance Sheets and Income Statements For the last 3 years, signed and dated.						
		Affiliate Company Interim Balance Sheet and Income Statement Within 60 days, signed and dated.						
		Affiliate Company Business Debt Schedule As of the date of application, signed and dated						



Z	BUSINESS APPLICATION		Main Financial Instiution:						
ATI	Legal Name of Business Applicant (for sole proprietor	Trade Name (doing bi	usiness as)	Tax ID Numb	er (For Sole Prop	rietor, o	wner's SSN)	
NZ M		DUNS Number			er				
APPLICANT INFORMATION	Primary Contact Name	Primary Contact Phone Number (if different from Business)							
F	Street Address	City County State			e	Zip			
<u>y</u>	Mailing Address (if different from above)		•		·	Ctat			
진	Mailing Address (if different from above)		City		County	Stat	e	Zip	
SAF	Business Telephone Email		Date Business	s Establ	shed	•	Under Curre	nt Mana	gement Since
BUSINESS	Legal Status: Corporate	Sub-S	Corporation		Sole Proprieto	orship/Individua	al Gene	ral Part	nership
NS/	Limited Liability Company	Limite	d Partnership		Other (please	explain)			
E B	COMPANY OWNERSHIP List below		ownership of	the app	olicant				
	Officer Name(s)	SSN		Home	Street Addres	s	Title		% Owned
	(List below all business a	oncorno in u	shiah tha annli	Lant co		of the individ	uala liatad in th		rohin acation
	AFFILIATES above have ownership in a	excess of 20°	%)	Jani CO	inpany or any	or the marvia		e Owner	iship section
	Company Name	Owner					% Owned		
	Please answer the following que							_	
	s the business applicant or any guarantor or co		•	-	-	_			es No
	Are any business assets held in trust? (If yes, p Is any loan applicant, or any director, executive							es No es No	
	director, or principal share holder of any financia	·		• •					
	s the business an endorser, guarantor, or co-ma	J					rovide details.)		es No
	Does your business use or store any hazardous	nioxic malena	ns or produce n	azai u u u	STUXIC WASIE?			☐ ¥6	es No



	BUSINESS DEBT S	CHEDULI	=								
1	Provide information for all bu loan proceeds. (Business ac subsidiaries on a separate sl	quisitions and	nent debts, c start-ups, pl	ontracts, r ease prov	notes, and mor ide opening da	tgages payak y information	ole. Also ind i.) Please a	icate if the d ttach debt so	ebt is to be re chedule for al	efinanced w I affiliates ar	ith SBA nd
7 2 2 1	Creditor Name/Address		Original Amount	Original Loan Da	Present te Balance	Interest Rate	Maturity Date	Monthly Payment	Current/ Delinquent	Collateral	Payoff with Proceeds?
֡֝֞֝֟֝֝֟֝֟֝֝֟֝֟֝֓֓֓֟֝֓֓֓֟֝֓֓֓֓֓֟֝֓֓֓֓֟֝֓֓֓֓֡֡֡֓֓֡֓֡֓֡֓֡											
֡֝֞֝֝֟֝֝֟֝֟֝֟֝֟֝֟֝֟֝											
` 	Has any debt being refinanc	ed been more	than 29 dav	s past due	in the last 3 ve	ears?	Yes 🗀	No No			
	List all previous gover						id, in this	section. (S	BA, USDA	, EXIM, etc	;)
] ۵	Name of Agency / Loan #	Original A	Amount	Date	of Request	Approved of	or Declined	Bala	ance	Current o	r Past Due
		\$						\$			
		\$						\$			
-		\$						\$			
-		\$						\$			
_		\$						\$			
	Total Present Loan Balance	e: \$				Total Monti	nly Payment	s: \$			
	Please list other bu	usiness de	posit ac	counts							
	Financial Institu	tion				nt Type Savings, etc.)	Cı	ırrent Balanc	e	Average Ba	alance



Ŀ	PROJECT COST WORKSHEET	
WORKSHEE	Use of Funds	Amount (Round to the nearest dollar)
SX S	Land/Building Purchase	\$
9	Building Renovation/New Construction	\$
	Equipment Purchase	\$
ST	Leaseholds	\$
00	Working Capital	\$
5	Inventory	\$
JECT	Acquisition of Existing Business	\$
PRO	Pay Off/Refinance Existing Business Debts	\$
ద	Pay Off/Refinance Existing SBA Loan	\$
	Soft Costs (SBA Guaranty & Closing Fees)	\$
	Other	\$

Total Project Cost: \$ 0.00

SOURCES OF FUNDS	
Source	Amount (Round to the nearest dollar)
Borrower's Equity Contribution (List Source of Equity)	\$
Credit Union SBA Loan Requested	\$
Other Governmental Loan Assistance	\$
Other	\$

Total Project Funding: \$ 0.00

COLLATERAL OFFERED						
Collateral	Present Market Value (Round to the nearest dollar)					
Land	\$					
Building	\$					
Machinery & Equipment	\$					
Furniture	\$					
Fixtures	\$					
Accounts Receivable	\$					
Inventory	\$					
Residential Real Estate	\$					
Stocks/Bonds (attach most recent statements)	\$					
Business Vehicles	\$					
Key Person Life Insurance	\$					
Other	\$					
Total Collateral Offered: \$ 0.00						

Further Explanation of project cost items, sources of equity contributed to the project and all collateral offered:



APPLICANT'S AGREEMENT & CERTIFICATION

By signing below, you certify that all the information you've given with this application is true and complete. You authorize us to verify all your statements with any source, obtain credit and employment history (including your spouse's if you live in a community property state), and exchange information with others about your credit and account experience with us. You agree to provide additional information that we may require to process this application, including but not limited to true and complete federal income tax returns, employment verification, and income verification.

You also agree to reimburse the Lender for its expenses incurred in connection with any credit commitment. These expenses include without limitation Lender's appraisal, environmental services, and legal costs and are payable even though the extension of credit may not be consummated.

By signing below, you certify that you have recieved Midwest Business Solutions d/b/a Pactola, herinafter referred to as Pactola's Notice of Right to Recieve an Appraisal. That notice is provided as a seperate page in this application and is to be retained by you for your records.

This is to advise you that the sole purpose of the appraisal is to establish adequacy of the property as security for the credit union. Pactola, the appraiser, any inspector retained by Pactola, and any agency insuring the loan make no representations or warranties of any kind or nature as to the market value of the property or its improvements.

Everything you have stated in this application is correct to the best of your knowledge. You understand that Pactola will retain this application whether or not it is approved. Pactola is authorized to check your credit and employment history and to answer questions about Pactola's credit experience with you. You have read and understood the application form and agree to provide any additional information that may be legally required to determine creditworthiness. (Note: Falsification of credit information to a credit union may be a federal offense and may result in exemption from discharge in the event a petition for bankruptcy is filed).

Authorized Signature:	Authorized Signature:
Print Name & Title:	Print Name & Title:
Street Address:	Street Address:
City, ST, Zip:	City, ST, Zip:
Soc. Sec. or Tax ID No.:	Soc. Sec. or Tax ID No.:
Date:	Date:



APPLICANT: PLEASE RETAIN THIS DISCLOSURE FOR YOUR RECORDS

Notice of Right to Appraisal: In the event that you have applied for a loan that will be secured by residential rela property, we may order an appriasal to determine the property's value and charge your for this appriasal. We will promptly give you a copy of any residential real property appriasal we may order in connection with this application, even if your loan does not close.

This is to advise you that the sole purpose of any appraisal we order is to establish the adequacy of the property as security for the credit union. Midwest Business Solutions d/b/a/ Pactola, the appraiser, any inspector retained by the Lender, and any agency insuring the loan make no representations or warranties of any kind or nature as to the market value of the property or its improvements. You can pay for an additional appraisal for your own use at your own cost.



SBA LOAN APPLICATION MANAGEMENT PROFILE

This form needs to be completed for **EACH** officer, director, manager (LLC), key employee, and shareholder or member that own 20% or more of the applicant business or a related operating company. Please complete all the requested information. Use additional pages as needed. If an item is not applicable, please indicate. Please attach additional relevant information as a separate exhibit.

	Applicant B	usiness Name								
	First Name		Middle	Last		Social Security Nu	ımber			
1	Former Nar	ne: First	Middle	Last	Last		When Used			
Z -	Primary Re	sidence Address		City	City		State		Zip	
֡֝֟֝֟֝֟֝֟֝֟֝֟֟֝֟֝֟֟֝	Primary Res	sidence From	Primary Residence To	Primary Residence	Phone	Business Phone				
<u>}</u>	Previous Re	esidence Addres	ss	City		State		Zip		
-	Previous Ac	dress From	Previous Address To	Date of Birth		Place of Birth				
ľ	Are you em	ployed by the U	J.S. Government? if Yes, Ager	ncy and Position:			Yes	No		
ſ	Military Serv	rice Background	l: Branch	То	From	Honorable Dis Vietnam Vete		Yes Yes	No No	
Ī	Rank at Dis	charge		Major Assignment/A	Accomplishment					
Ī	CURREN (SBA, US	T & PRIOR GO' DA, FHA, VA, E	VERNMENT DEBT List all pi EXIM, and Student Loan Deb	revious government ts).	loans applied for	or recieved, even if	fully repaid	, in this	section	
	Name of Agency	Agency Loan #	Borrower's Name	Original Amount of Loan	Date of Application	Loan Status	Outstand Balance		Amount of Los to Governmen	
-										
-										
		ONAL EXPERIE	ENCE List chronologically, b	peginning with most	recent education.	Attach separate e	xhibit, if nec	essary.		
		ecillical Irailiili		Moior						
From To No. 10 N				Major		Degree/Certificate				
L		ecimical Irainin		Major		Location				
From To College or Technical Training Name				Major		Degree/Certificate				
		echnical Irainin		Major		Location				
	From		То	Major		Degree/Certificate				



more boxes for race may be selected.

SBA LOAN APPLICATION MANAGEMENT PROFILE

EMPLOYMENT HISTORY List chronolo	ogically, beginning with pr	esent employment. At	ttach separate e	xhibit, if neces	sary. Yes] No		
Company Name			Locatio	n				
From	Title		I					
Duties								
Company Name			Locatio	n				
From To	Title							
Duties								
INSURANCE INFORMATION Do you		insurance policy?	Yes	No				
If yes, please provide the following in: Life Insurance Company	formation. Agent Name	e	Ī	Telephone				
Name of Insured	Beneficiary			\$ Amount				
	1 1	eneficiary \$An			Amount			
ADDITIONAL INFORMATION Please	e use this space to incl	lude any additional r	relevant inform	nation, or atta	ch as separate ex	khibit.		
ADDITIONAL INFORMATION Please								
BY SIGNING BELOW, I hereby certify that Signature INFORMATION FOR GOVERNMENT STATIS DISCLOSURE IS VOLUNTARY. ONE OR MO Administration for all SBA 7(a) Guaranteed business MUST provide the following inform MANAGEMENT (Proprietor, partners, office	t all information I have pro STICAL PURPOSES ONLY. PRE RACES MAY BE SELE Loan Applications in ord mation. DO NOT complet	Printed Name THE FOLLOWING INFECTED. The following is the participate this section for key response.	in connection he FORMATION HAI information is re pation of various nanagers who a	S NO BEARING quired by the l g groups in the re not owners o	Date Don't CREDIT DON'THE CREDIT DON'THE Son THE CREDIT DON'T CREDIT	ete. ECISION.		
BY SIGNING BELOW, I hereby certify that Signature INFORMATION FOR GOVERNMENT STATIS DISCLOSURE IS VOLUNTARY. ONE OR MO Administration for all SBA 7(a) Guaranteed business MUST provide the following infor	t all information I have pro STICAL PURPOSES ONLY. PRE RACES MAY BE SELE Loan Applications in ord mation. DO NOT complet	Printed Name THE FOLLOWING INFECTED. The following is the participate this section for key response.	in connection he FORMATION HAI information is re pation of various nanagers who a	S NO BEARING equired by the less groups in the re not owners on the short of the short owners owners of the short owners of the short owners of the short owners	Date Don't CREDIT DON'THE CREDIT DON'THE Son THE CREDIT DON'T CREDIT	ECISION.		
BY SIGNING BELOW, I hereby certify that Signature INFORMATION FOR GOVERNMENT STATIS DISCLOSURE IS VOLUNTARY. ONE OR MO Administration for all SBA 7(a) Guaranteed business MUST provide the following inform MANAGEMENT (Proprietor, partners, officencessary Name and Social Security Number	t all information I have prosection of the prose	Printed Name THE FOLLOWING INFECTED. The following is the participate this section for key response.	FORMATION HAS information is repation of various managers who a	S NO BEARING equired by the Us groups in the re not owners on the re not owners of the re not owners	Date Date ON THE CREDIT DO J.S. Small Business program. Each OW of the business. Down.) Use a seperate practical control of the separate p	ete. ECISION.		



SBA LOAN APPLICATION BUSINESS PROFILE

Please complete all required information. Use additional pages if necessary or attach additional relevant information as seperate exhibits or provide this in a seperate written document.

	Name of Applicant
빍	Operating Company Name (Check here if attaching a business plan and projections)
ווב ביים אבו	Operating Company Name (Check here if attaching a business plan and projections)
SINESS	Outlook for Operating Company
기	
۵	How will this loan benefit your company?
_	Vill funding this loan create new employment opportunities?
	Customer profile: What are the primary markets who use your products?
	List key customers(Name, City, State, and Percentage of Revenues
	List major competitors
	List major suppliers
	Future Plans: What is your growth strategy? (Rapid (>10%), moderate, or maintain market position.) How will you achieve this?
	What are the impediments that may impact your success?
	Major Past Accomplishments: How does your business differ from the competition? What are your competitive advantages?



SBA LOAN APPLICATION BUSINESS PROFILE

Please complete all required information. Use additional pages if necessary or attach additional relevant information as seperate exhibits or provide this in a seperate written document.

MARKETING ANALYSIS & STRATEGY What are your promotional, pricing, and distribution strategies?									
NUMBER OF EMPLOY	NUMBER OF EMPLOYEES at your business and including subsidiaries and affiliates								
ó	Business	Affiliates or Subsidiaries	 S						
At time of application									
If loan is approved									
Totals	0	0							
KEY CONTACTS, VENI	OORS OR PARTNERS								
Accountant Name			Phone						
Attorney Name			Phone						
Business Insurance Agent N	ame		Phone						
Residential Insurance Agent	Name		Phone						
Certified Development Corpo	oration Name		Phone						
Real Estate Agent Name			Phone						
PLEASE ANSWER THE	FOLLOWING QUESTIONS								
Have you or any officer of you defaulted on any debts? (If	our company ever been involved in bankı yes, please provide details.)	ruptcy or insolvency proceedir	ngs or Yes	□ No					
your business or their spous Administration, Small Busine	ly member or your household, or anyone les or members of their households work less Advisory Council, SCORE, ACE, any de the name and address of the person a	for the Small Business Federal Agency, or the partici	pating Yes	□ No					
	use the services of any concern in which If yes, please provide details.	someone in your company ha	as a Yes	☐ No					
Use this space to provide additional information on any of the questions to which you responded "Yes."									
BY SIGNING BELOW, I here	eby certify that all information I have prov	vided on this form or in connec	ction herewith is true, co	orrect, and complete.					
Signature		Printed Name		Date					



PERSONAL FINANCIAL STATEMENT

Financial Condition as of:	, 20	Main Credit Union Used					
Complete this form for: (1) each proprietor, or (2) ea (4) any person providing a guaranty on the loan.	ich partner who own	s 20% or more interest, or (3) each stockholder own	ning 20% or r	more interest, or			
Applicant		Co-Applicant	Co-Applicant				
Social Security No.		Social Security No.	Social Security No.				
Birth Date		Birth Date					
Address		Address	Address				
Phone		Phone					
Email		Email					
Employer	Yrs. on job	Employer	Yrs. or	n job			
Position/Title/Business Type	Yrs. in profession	Position/Title/Business Type	Yrs. in	profession			
Employer Address		Employer Address					
Business Name of Applicant/Borrower							
Name, Address & phone number of nearest relative	not living with appli	cant(s)					
	Personal F	inancial Statement					
Assets	Value	Liabilities	Monthly Payment	Balance Outstanding			
Cash and Deposit Accounts (Section 1)	Value	Accounts Payable	1 dyllione	Outstanding			
Stocks, bonds and marketable securities (Section	n 2)	Notes Payable (Section 7)					
3. Non-marketable securities (Section 3)		Unsecured debt					
4. Accounts, loans and notes receivable		Unpaid taxes and interest					
5. Cash Value Life Insurance (Section 4)		Life Insurance Policy Loans					
6. Real Estate Investment (Section 5)		Investment Real Estate Debt (Section 5)					
7. Real Estate Personal Residence (Section 5)		Personal Residence Debt (Section 5)					
8. Real Estate Other (Section 5)		Other Real Estate Debt (Section 5)					
9.		Other Debts (please define)					
10. Vehicles/Equipment							
11. Business ventures, partnerships, LLCs (Section	6)						
12. Personal Property							
13. Other Assets (please define)							
14.							
15.							
16.		Total Monthly Payments/Liabilities					
17.		Net Worth					
18. Total Assets		Total Liabilities and Net Worth					
Sources of Income		Contingent Liabilities	(if any)				
Salary, Bonus and Commission Net Invest Income Real Estate Income Other Income* Please Provide Description of Other Income	\$ \$ \$	As Guarantor or Co-Maker Any Legal Claims & Judgments Lease Obligations Other Special Debt	\$ \$ \$ \$ \$ \$				
* Alimony or child support payments need not be dis Please Provide Details of Contingent Liabilities	sclosed in "Other Inc	come" unless it is desired to have such payments co	unted toward	I total income.			



PERSONAL FINANCIAL STATEMENT

		Se	ection 1 -	Cash Acc	counts					
Account Title Financial Insti						Pledged Y/N				
		Total to Line 1 Person	anal Einana	vial						
		Section 2 - Marke			Brokerage	Accounts				
# of Shares	Na	me of Security			Market Value Exchange Co			Total	Value	
ii oi oilares	140	and or occurry	<u> </u>	.001	Warket value	ZXOHANGO	0001	10101	value	
					2 Personal F		atement			
					e Securities			1 -		
Number of Shares		Description	In Na	ame of	Pledg	ed?	Value	Source	of Value	
			Total to L	ine 3 Perso	nal Financial	Statement				
		Section 4 - Life Insu	rance Ca	rried, Inc	luding Grou	ıp Insurai	nce			
Insurance Company	0	wner of Policy		ciary and	Face Amount		Policy Loans	Cash	Value	
			Relat	ionship						
				ine 5 Personal Financial Statement						
				eal Estate		_			I	
Address and Type of Pro	perty (Resi	dence, rental, other)	Percent Owned	Date Acquired	Cost	Present Value	Mortgage Balance	Monthly Payment	Monthly Rental	
				, 10qu 0u			24.4	- aymont	Income	
					1					
					+					
					-					
					1					
					+					
					1					
		Total to Line	e 6-8 Perso	nal Financia	al Statement					



PERSONAL FINANCIAL STATEMENT

Section 6 - Business Ventures/Partnerships/LLCs							
Name of Business	Your Position	Your % Ownership	Net Worth of Business	Total Assets of Business	What does Busi Years in Bus		Tax ID Number
		Ownership	business	Dusiness	rears in bus	siness	
Total of Your Percentage of Net Wo	Lorth of Business to Lir	l ne 11 Personal					
		cial Statement	t 				
Note Holden	Origin		- Notes Payab Current Balance		at	Callat	
Note Holder	Origina	al Balance (Jurrent Balance	Monthly Payme	nt	Collate	erai
Totals to Line 2, Liabilitie	a Doroonal Financial	Statement					
	-			t-t		Applicant	Co-Applicant
The following information is applica	able to the person(s) s	igning this Per	Sonai Financiai S	tatement		(Yes/No)	(Yes/No)
1. Are you a U.S. Citizen?							1
2. Are you involved in any suits or l							1
Have you ever declared bankrup							
4. Have any judgments ever been e							
5. Do you have ownership in or are	• •						
6. Do you pay alimony, child suppo		nance paymer	nts? If yes, amou	nt \$			
7. Do you have any contested tax li							
8. Do you have any contingent liab	ilities as endorser or g	juarantor?					
9. Are any debts past due?	10						1
10. Have you ever had any assets	•						
11. Have you applied for a loan in t							1
If you answered yes to questions 2-	11, please provide de	tails:					
The financial statement and the informat Lender, from time to time, to extend creations							
undersigned may either individually or jo	ointly with others, execu	ite a guarantee	in the Lender's fav	or. The undersign	ed acknowledges	that the Lend	er will rely on the
information contained in this Financial Scomplete and that there are no material of	omissions. The undersign	ned agrees that	t the Lender may co	onsider this Financia	I Statement as cor	ntinuing to be	true and complete
until a written notice of a change is given verify the accuracy of the information con	ntained herein and to de	termine the und					
from others concerning the Lender's credi	it experience with the un-	dersigned.					
Signature:			Signatur	e:			
Date:							
			Da	ie.			

Personal Budget Analysis

Name	Name
Income Net Salary Spouse's Salary Owner Draw Rental Income Interest Income Other () Other ()	Monthly
Total Monthly Income	
Expenses Mortgage Payment Auto Payment Installment Payments Credit Lines/Cards Utilities & Telephone Insurance Food Clothing Child Care Contingent Liabilities Other () Other ()	Monthly
I/We hereby certify that the above information knowledge.	ntion is valid and correct to the best of my/our
Signature	Date
Signature	

Business History

Please write about each of the business elements listed below. Include any brochures, advertising materials or printed history of the business if available. (Use separate attachments if necessary.)

General Information:
Date business started:
What kind of business is it (construction, manufacturing, retailing, services, etc.)?
Date business originally acquired by the seller and reason for selling:
Products or Services/Description of Business Activity: If a manufacturer, describe the products you plan to make. If you are a retailer, discuss the various types of goods to be sold. If you are a service business, describe the services offered.
Sales/Marketing Activity: Who will or do you sell to (retailers, wholesalers, the public, etc.)?
List your key customers.
How are your sales made?
Who are your suppliers and what are their credit sales terms?
How do you determine the price of your products or services?
How will or do you advertise? What promotional activities will you or do you conduct to generate sales?

(Continued)
Competition: Briefly list and describe your major competitors.
What advantage will or does your business have over your competitor's operation?
What is the approximate distance of your competitors, relative to your current/proposed location?
Location: If a retail business, describe the area and customer base.
Describe your business locations' advantages and disadvantages.
Facilities: Describe the type and condition of the building, if applicable.
What improvements are needed, if any?

							Debt Sched	ule			
Business Debt											
Business Debt Schedule for:											
Creditor Name	Original	Original	SBA Loan	Current	Interest	Maturity	Monthly	Collateral or Security	Current or	Purpose of	
& Account # / SBA Loan #	Amount	Date		Balance	Rate	Date	Payment		Delinquent	Loan	٧
Signature:				_Title:				Date Signed:			

Aging of Accounts Receivables and Payables

Please provide a detailed aging report. Please note, da business balance sheet.	te of agings must match current or most recent
Standard Terms Offered on Account	
Standard Terms Received on Account	
Special Terms Offered or Received	
Signed	Date

ASSUMPTIONS TO PROJECTIONS

Company Name
Please use this page to explain the assumptions used to generate the projection figures. For existing businesses, be sure to include the specific reasons as to why the figures differ
significantly from previous years for Revenues, COGS, Expenses and Withdrawls.
Explanations