

Other

Total Income:

Coffee Bank												
& Trust A division of Coffee County Bank	& Trust A division of Coffee County Bank Personal Financial Statement Dated:											
Individual #1:			Individual #2:									
Name:			Name:									
Address:			Address:									
City:		Zip:			Zip:							
SSN:			SSN:									
Home Ph:			Home Ph:									
Cell Ph:			Cell Ph:		DL # & State:							
DL Iss. Date:	DL Exp. Date:		DL Iss. Date:		DL Exp. Date:							
Employer:	Email:	had a de la bassa de la constanta de la consta	Employer:	Email:								
NOTE: If this personal financial statement includes a second individual who is borrowing or guaranteeing debt with Coffee County Bank, the columns titled Solely Owned #2 and Solely Liable #2 should be completed.												
For the post references in each row [e.g. (1), (2), (3)], please itemize each subject on the corresponding attached schedules.												
Assets		Sole Individual #1	ely Owned Individual #2	lointly Own	Total							
Cash, Money Market, CD's	(4)	muividuai #1	muividuai #2	Jointly Own	Total							
Government & Marketable Securities	(1)											
Closely-Held Securities	(2)											
Accounts or Notes Receivable	(3)											
Cash Value of Life Insurance	(4)											
Personal Residence	(5)											
Other Real Estate	` '											
Personal Property	(5)											
IRA's, 401K's, Keoughs, Etc.												
Other Assets	otals:											
	- Ctaioi											
Liabilities		Individual #1	ely Liable Individual #2	Jointly Liable	Total							
Notes Payable to Banks - Secured	(6)											
Notes Payable to Banks - Unsecured	(6)											
Other Notes Payable - Secured	(6)											
Other Notes Payable - Unsecured	(6)											
Accounts Payable & Credit Cards	(4)											
Real Estate Mortgages	(5)											
Tax Liability	(0)											
Loans on Life Insurance	(4)											
Margin Accounts	(4)			1								
Other Liabilities	otals:											
Net Worth	otais.	Individual #1	Individual #2	Combined	Total							
Total Net Worth												
Contingent Liabilities		Individual #1	Individual #2	Jointly Liable	Total							
As Guarantor or as Endorser	(7)											
Other Contingent Debt	(7)											
Т	otals:											
*Above Contingent Liabilities section must be con For the Year:	mpleted. If no conti	ingent debt is involved, please writ	te or type NONE in the above section. For the Year:									
Sources of Income	Individual #1	Individual #2	Monthly Spending	Individual #1	Individual #2							
Wages & Salaries Commissions, Bonuses, Etc.			Mortgage/Rent - Residence									
Interest & Dividends			Other Mortgage Automobi									
Rental Income			Credit Caro									
Distributions, Partnership Draws	1	ļ	Alimor	ıy								

Total Expenditures:

Other

Schedule (1) - Cash														
Name &	Account Number & Type			Balance		Owned By		Pledged?						
Schedule (2	Schedule (2) - Marketable Securities													
Face Value	Owned By		Descrip	tion	Cost			nt Value	Amount Pledged					
					-									
					+									
	sely Held Securities				1									
Face Value	% of Total Shares	Owned By		Description			Current Value		Amount Pledged					
							 							
		 					 							
		+												
Schedule (4) - Life	Incurance													
	urance Company	Owned B	tv	Benefic	arv	Face Value	C Value Loans		Amount Pledged					
11131	drance Company	Owned	· y	Delienc	iai y	1 ace value	O Value	Loans	Amount rieugeu					
Schedule (5) - Re	al Estate (If only a percentage is	s owned input the	total prope	erty value including you	share)									
(0)		, , , , , , , , , , , , , , , , , , , ,	To too proper	, , , , , , , , , , , , , , , , , , , ,										
Desc	ription & Location	Owned By	%	Date Acquired	Cost	Value	Mortga	age Bal.	Monthly Payment					
		ļ												
Schedule (6) - No	tes Payable (Excluding debt on p	property listed in se	chedule #5	5)										
						0 (0)								
Name & Address of Note Holder			Obligor	LoanType	Current Balance	Pmt		Collateral						
Schedulo (7) Ott	ner Contingent Debt Description	(List type of contin	dent dept	and \$ amount)		ı								
Type of Continge	,	List type of contin	•	ana g amount)	Additional Comr	nents:								
Type of Contingent Debt \$ Amount				Additional Comments.										
	Have you ever drawn a will? defendant in any legal suits of			Executor:										
Are you a	defendant in any legal suits	or legal actions?												
	If ves. describe:													
	Are you a princip	al shareholder	, directo	r, or executive offic	er of a bank?									
Have you	If so, list Bank name: ever filed for bankruptcy?			If you describe:										
Have you o	of Dependents and ages.			ii yes, describe:										
	No. of Dependents and ages:													
I/We provide this personal financial statement as an accurate and true representation of my/our current financial condition. I authorize Coffee County Bank to confirm														
this fact by periodically obtaining credit reports on me/us. I agree to immediately notify lender of any change in my/our financial condition.														
If inint														
Signature			Date:		If joint,				Date:					
oignature.			Date.		oignature.				Date:					