

## Personal Financial Statement

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Applicant: David Caswell

Co-applicant: Miriam Caswell

Statement as of Oct 14, 2010

Assets	Applicant	Co-Applicant	Liabilities & Net Worth	Applicant	Co-Applicant
Cash in Checking & Savings (1):	12,000	11,500	Loans / Notes Payable (6):	2,700	1,000
Cash in Property Accounts:	1,500	21,450	Accounts & Bills Payable (6):	0	0
Cash in IRAs (1):	13,000	11,500	Due to Brokers:	0	0
Marketable Securities (5):	14,125	19,000	Real Estate Mortgages (3):	81,995	79,330
Marketable Securities, IRA (5):	0	0	Unpaid Tax (Including Income & RE):	0	0
Life Insurance - CSV:	42,000	2,600	Other Debts:	3,000	1,000
Real Estate Owned (100%) (3):	89,500	0	Bal. Due on Partnerships, Notes (4):	0	0
R.E. Owned (Less than 100%) (3):	0	104,940	<b>TOTAL LIABILITIES:</b>	<b>87,695</b>	<b>81,330</b>
Partnerships/PC Interests (4):	0	0	<b>NET WORTH:</b>	<b>145,930</b>	<b>133,660</b>
Personal Property:	24,500	14,500	<b>TOTAL LIAB. &amp; NET WORTH:</b>	<b>233,625</b>	<b>214,990</b>
Other Assets:	10,500	18,000			
Automobiles/Vehicles (incl. boats):	17,500	8,000			
Notes Receivable (2):	9,000	0			
Accounts Receivable (2):	0	3,500			
Non-Readily Marketable Sec. (5):	0	0			
Non-Readily Marketable Sec., IRA (5):	0	0			
<b>TOTAL ASSETS:</b>	<b>233,625</b>	<b>214,990</b>			

Annual Income	Applicant	Co-Applicant	Annual Expenditures	Applicant	Co-Applicant
Salary or Adjusted Gross Income:	38,500	43,500	Federal Income & Other Taxes:	13,248	4,275
Bonus or Commissions:	19,750	0	State Income & Other Taxes:	5,870	1,524
Dividends and Interest:	525	0	Property Taxes (3):	425	1,185
Net Real Estate Income (3):	3,600	13,181	Mortgage Payments (3):	6,288	6,384
Capital Gains:	0	0	Property Insurance (3):	750	611
Other Income:	4,500	0	Life Insurance:	625	540
<b>TOTAL INCOME:</b>	<b>66,875</b>	<b>56,681</b>	Rental / Condominium Fees:	0	0
Notes: Net Real Estate Income is before debt service; it is also before property taxes and insurance, which are accounted for under Annual Expenditures. The assets, liabilities, income, mortgage payments and insurance of property owned at less than 100% are reported here factored by the percentage owned.			Interest & Principal on Loans/Bills (6):	1,032	600
			Investments:	3,600	2,400
			Alimony / Child Support:	4,800	0
			Tuition Expenses:	1,500	1,800
			Medical Expenses:	420	120
			Other Expenses:	20,000	18,000
			<b>TOTAL EXPENDITURES:</b>	<b>58,558</b>	<b>37,438</b>

Contingent Liabilities	YES	NO
Are you a guarantor, co-maker, or endorser for any debt of an individual, corporation, or partnership?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Do you have any outstanding letters of credit or surety bonds?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Are there any suits or legal actions pending against you?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Are you contingently liable on any lease or contract?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Personal Information			
Applicant		Co-applicant	
Name:	<b>David Caswell</b>	Name:	<b>Miriam Caswell</b>
Employer:	Victor Jack Insurance Co.	Employer:	Lewis Department Store
Employer Street Address:	210 Avenida Del Rio	Employer Street Address:	37 Bench Row Road
City, State, ZIP:	Yuma, AZ 85364	City, State, ZIP:	Yuma, AZ 85364
Employer Phone Number:	(928) 555-1212	Employer Phone Number:	(928) 555-1212
No. of Years with Employer:	7	No. of Years with Employer:	2
Title/Position:	Sales Representative	Title/Position:	Office Manager
Name of Prev. Employer:		Name of Prev. Employer:	Delouchrey & Holleran, Attorneys at Law
Position at Prev. Employer:		Position at Prev. Employer:	Office Manager
No. of Years w/ Prev. Emp.:		No. of Years w/ Prev. Emp.:	5
Home Street Address:	818 Commonage Road	Home Street Address:	818 Commonage Road
City, State, ZIP:	Yuma, AZ 85364	City, State, ZIP:	Yuma, AZ 85364
Home Phone:	(928) 555-2121	Home Phone:	(928) 555-2121
Social Security Number:	555 55 5555	Social Security Number:	555 55 5555
Date of Birth:	06/10/65	Date of Birth:	12/05/66
Inc. Tax returns filed through:	2009	Inc. Tax returns filed through:	2009
Any returns being audited?	No	Any returns being audited?	Yes
If yes, what year(s)?		If yes, what year(s)?	1994
Any taxes past due?	No	Any taxes past due?	No
If yes, amount:		If yes, amount:	
Ever declared bankruptcy?	No	Ever declared bankruptcy?	No
Have you drawn a will?	Yes	Have you drawn a will?	Yes
Year drawn:	1999	Year drawn:	1999
Name of executor:	Nicola May, Esq.	Name of executor:	Scott Housemara, Esq
Number of dependents:	0	Number of dependents:	0
Do you have financial plan?	Yes	Do you have financial plan?	Yes
If yes, name of planner:	Jason Berg, CFP	If yes, name of planner:	Jason Berg, CFP
Life Insurance - CSV:	\$42,000	Life Insurance - CSV:	\$2,600
Name of Insured:	David Caswell	Name of Insured:	Miriam Caswell
Name of Company:	Ayers-Carloco Insurance Co.	Name of Company:	Ayers-Carloco Insurance Co.
Policy Number:	55-5555-5AC	Policy Number:	55-5555-5BC
Beneficiary:	Miriam Caswell	Beneficiary:	David Caswell

**Schedule 1: Cash in Checking & Savings Accounts**

Applicant		Co-applicant	
<b>Checking Account #1</b>		<b>Checking Account #2</b>	
Bank Name:	Bank of the Americas	Bank Name:	Bank of the Americas
Street Address:	4108 42nd Street	Street Address:	4108 42nd Street
City, State ZIP:	Yuma, AZ 85364	City, State ZIP:	Yuma, AZ 85364
Checking Account #:	55-53452-43-9	Checking Account #:	55-12345-67-3
Amount:	\$2,000	Amount:	\$3,500
<b>Checking Account #3</b>		<b>Checking Account #4</b>	
Bank Name:		Bank Name:	
Street Address:		Street Address:	
City, State ZIP:		City, State ZIP:	
Checking Account #:		Checking Account #:	
Amount:		Amount:	
<b>Checking Account #5</b>		<b>Checking Account #6</b>	
Bank Name:		Bank Name:	
Street Address:		Street Address:	
City, State ZIP:		City, State ZIP:	
Checking Account #:		Checking Account #:	
Amount:		Amount:	
<b>Checking Account #7</b>		<b>Checking Account #8</b>	
Bank Name:		Bank Name:	
Street Address:		Street Address:	
City, State ZIP:		City, State ZIP:	
Checking Account #:		Checking Account #:	
Amount:		Amount:	
<b>Checking Account #9</b>		<b>Checking Account #10</b>	
Bank Name:		Bank Name:	
Street Address:		Street Address:	
City, State ZIP:		City, State ZIP:	
Checking Account #:		Checking Account #:	
Amount:		Amount:	

<b>Savings Account #1</b>		<b>Savings Account #2</b>	
Bank Name:	Village Green Credit Union	Bank Name:	Village Green Credit Union
Street Address:	56 Okanagan Landing Road	Street Address:	56 Okanagan Landing Road
City, State ZIP:	Yuma, AZ 85364	City, State ZIP:	Yuma, AZ 85364
Savings Account #:	12-4567-34	Savings Account #:	21-7654-43
Amount:	\$10,000	Amount:	\$8,000
<b>Savings Account #3</b>		<b>Savings Account #4</b>	
Bank Name:	Bank of the Americas	Bank Name:	Bank of the Americas
Street Address:	4108 42nd Street	Street Address:	4108 42nd Street
City, State ZIP:	Yuma, AZ 85364	City, State ZIP:	Yuma, AZ 85364
Savings Account #:	55-59992-47-9 <input type="checkbox"/> IRA	Savings Account #:	55-53452-43-9 <input type="checkbox"/> IRA
Amount:	\$13,000	Amount:	\$11,500
<b>Savings Account #5</b>		<b>Savings Account #6</b>	
Bank Name:		Bank Name:	
Street Address:		Street Address:	
City, State ZIP:		City, State ZIP:	
Savings Account #:	<input type="checkbox"/> IRA	Savings Account #:	<input type="checkbox"/> IRA
Amount:		Amount:	
<b>Savings Account #7</b>		<b>Savings Account #8</b>	
Bank Name:		Bank Name:	
Street Address:		Street Address:	
City, State ZIP:		City, State ZIP:	
Savings Account #:	<input type="checkbox"/> IRA	Savings Account #:	<input type="checkbox"/> IRA
Amount:		Amount:	
<b>Savings Account #9</b>		<b>Savings Account #10</b>	
Bank Name:		Bank Name:	
Street Address:		Street Address:	
City, State ZIP:		City, State ZIP:	
Savings Account #:	<input type="checkbox"/> IRA	Savings Account #:	<input type="checkbox"/> IRA
Amount:		Amount:	

**Schedule 2: Notes and Accounts Receivable**

Applicant		Co-applicant	
Notes Receivable #1	List Name & Address of Maker	Notes Receivable #2	List Name & Address of Maker
Name of Maker:	Paula Dolan	Name of Maker:	
Street Address:	1889 Profile Falls Road	Street Address:	
City, State, ZIP:	Hill, NH 03243	City, State, ZIP:	
Amount:	\$7,500	Amount:	
Notes Receivable #3	List Name & Address of Maker	Notes Receivable #4	List Name & Address of Maker
Name of Maker:	Kara Hurry	Name of Maker:	
Street Address:	34 McChilda Lane	Street Address:	
City, State, ZIP:	Vernon, BC V1T-5J5	City, State, ZIP:	
Amount:	\$1,500	Amount:	
Notes Receivable #5	List Name & Address of Maker	Notes Receivable #6	List Name & Address of Maker
Name of Maker:		Name of Maker:	
Street Address:		Street Address:	
City, State, ZIP:		City, State, ZIP:	
Amount:		Amount:	
Notes Receivable #7	List Name & Address of Maker	Notes Receivable #8	List Name & Address of Maker
Name of Maker:		Name of Maker:	
Street Address:		Street Address:	
City, State, ZIP:		City, State, ZIP:	
Amount:		Amount:	
Notes Receivable #9	List Name & Address of Maker	Notes Receivable #10	List Name & Address of Maker
Name of Maker:		Name of Maker:	
Street Address:		Street Address:	
City, State, ZIP:		City, State, ZIP:	
Amount:		Amount:	
Notes Receivable #11	List Name & Address of Maker	Notes Receivable #12	List Name & Address of Maker
Name of Maker:		Name of Maker:	
Street Address:		Street Address:	
City, State, ZIP:		City, State, ZIP:	
Amount:		Amount:	

Accounts Receivable #1	List Name & Address of Maker	Accounts Receivable #2	List Name & Address of Maker
Name of Maker:		Name of Maker:	Bella Tuskegee
Street Address:		Street Address:	34 Chesterfield Road
City, State, ZIP:		City, State, ZIP:	Stanley, ID 83278
Amount:		Amount:	\$3,500
Accounts Receivable #3	List Name & Address of Maker	Accounts Receivable #4	List Name & Address of Maker
Name of Maker:		Name of Maker:	
Street Address:		Street Address:	
City, State, ZIP:		City, State, ZIP:	
Amount:		Amount:	
Accounts Receivable #5	List Name & Address of Maker	Accounts Receivable #6	List Name & Address of Maker
Name of Maker:		Name of Maker:	
Street Address:		Street Address:	
City, State, ZIP:		City, State, ZIP:	
Amount:		Amount:	
Accounts Receivable #7	List Name & Address of Maker	Accounts Receivable #8	List Name & Address of Maker
Name of Maker:		Name of Maker:	
Street Address:		Street Address:	
City, State, ZIP:		City, State, ZIP:	
Amount:		Amount:	
Accounts Receivable #9	List Name & Address of Maker	Accounts Receivable #10	List Name & Address of Maker
Name of Maker:		Name of Maker:	
Street Address:		Street Address:	
City, State, ZIP:		City, State, ZIP:	
Amount:		Amount:	
Accounts Receivable #11	List Name & Address of Maker	Accounts Receivable #12	List Name & Address of Maker
Name of Maker:		Name of Maker:	
Street Address:		Street Address:	
City, State, ZIP:		City, State, ZIP:	
Amount:		Amount:	

**Schedule 3: Real Estate (Personal Residence, Real Estate Investments & Mortgage Debt)**

Applicant		Co-applicant	
<b>100% Owned (Property #1)</b>		<b>100% Owned (Property #2)</b>	
Type of Property:	Duplex - owner occupied	Type of Property:	
Street Address:	818 Commonage Road	Street Address:	
City, State, ZIP:	Yuma, AZ 85364	City, State, ZIP:	
Legal Owner(s):	David Caswell Miriam Caswell	Legal Owner(s):	
Purchase Price:	\$85,500	Purchase Price:	
Date of Purch. (mm/dd/yy):	1/15/1998	Date of Purch. (mm/dd/yy):	
Current Market Value:	\$89,500	Current Market Value:	
Mortgage Holder:	Bank of the Americas	Mortgage Holder:	
Loan Number:	45-78451-584-55	Loan Number:	
Mortgage Amt. Outstanding:	\$81,995	Mortgage Amt. Outstanding:	
Monthly Payment:	\$524.00	Monthly Payment:	
Interest Rate:	6.500%	Interest Rate:	
Annual Taxes:	\$425	Annual Taxes:	
Annual Insurance:	\$750	Annual Insurance:	
Annual Gross Income:	\$3,600	Annual Gross Income:	
Annual Net Op. Income:	\$2,425	Annual Net Op. Income:	
Property Cash in Accounts	\$1,500	Property Cash in Accounts	
<b>100% Owned (Property #3)</b>		<b>100% Owned (Property #4)</b>	
Type of Property:		Type of Property:	
Street Address:		Street Address:	
City, State, ZIP:		City, State, ZIP:	
Legal Owner(s):		Legal Owner(s):	
Purchase Price:		Purchase Price:	
Date of Purch. (mm/dd/yy):		Date of Purch. (mm/dd/yy):	
Current Market Value:		Current Market Value:	
Mortgage Holder:		Mortgage Holder:	
Loan Number:		Loan Number:	
Mortgage Amt. Outstanding:		Mortgage Amt. Outstanding:	
Monthly Payment:		Monthly Payment:	
Interest Rate:		Interest Rate:	
Annual Taxes:		Annual Taxes:	
Annual Insurance:		Annual Insurance:	
Annual Gross Income:		Annual Gross Income:	
Annual Net Op. Income:		Annual Net Op. Income:	
Property Cash in Accounts		Property Cash in Accounts	
<b>Less Than 100% Owned (Property #5)</b>		<b>Less Than 100% Owned (Property #6)</b>	
Type of Property:		Type of Property:	Multi-Family (6 unit)
Street Address:		Street Address:	10 Gallowtree Gate
City, State, ZIP:		City, State, ZIP:	Manchester, NH 85602
Percentage of Ownership:		Percentage of Ownership:	33.00%
Legal Owner(s):		Legal Owner(s):	Jack King Miriam Caswell
Purchase Price:		Purchase Price:	\$299,000
Date of Purch. (mm/dd/yy):		Date of Purch. (mm/dd/yy):	4/15/1996
Current Market Value:		Current Market Value:	\$318,000
Mortgage Holder:		Mortgage Holder:	Grafton Savings and Loan
Loan Number:		Loan Number:	148-567-5284
Mortgage Amt. Outstanding:		Mortgage Amt. Outstanding:	\$240,395
Monthly Payment:		Monthly Payment:	\$1,612.00
Interest Rate:		Interest Rate:	71.250%
Annual Taxes:		Annual Taxes:	\$3,590
Annual Insurance:		Annual Insurance:	\$1,852
Annual Gross Income:		Annual Gross Income:	\$48,600
Annual Net Op. Income:		Annual Net Op. Income:	\$34,500
Property Cash in Accounts		Property Cash in Accounts	\$65,000

Schedule 4: Partnerships (Business/Professional & Investments)					
Business / Professional		Applicant	Business / Professional		Co-applicant
Name:			Name:		
Date of Initial Investment:			Date of Initial Investment:		
Cost:			Cost:		
Percent Owned:			Percent Owned:		
Current Market Value:			Current Market Value:		
Bal. Due on Partnerships:			Bal. Due on Partnerships:		
Final Contribution Date:			Final Contribution Date:		
Business / Professional			Business / Professional		
Name:			Name:		
Date of Initial Investment:			Date of Initial Investment:		
Cost:			Cost:		
Percent Owned:			Percent Owned:		
Current Market Value:			Current Market Value:		
Bal. Due on Partnerships:			Bal. Due on Partnerships:		
Final Contribution Date:			Final Contribution Date:		
Investments (Including Tax Shelters)			Investments (Including Tax Shelters)		
Name:			Name:		
Date of Initial Investment:			Date of Initial Investment:		
Cost:			Cost:		
Percent Owned:			Percent Owned:		
Current Market Value:			Current Market Value:		
Bal. Due on Partnerships:			Bal. Due on Partnerships:		
Final Contribution Date:			Final Contribution Date:		
Investments (Including Tax Shelters)			Investments (Including Tax Shelters)		
Name:			Name:		
Date of Initial Investment:			Date of Initial Investment:		
Cost:			Cost:		
Percent Owned:			Percent Owned:		
Current Market Value:			Current Market Value:		
Bal. Due on Partnerships:			Bal. Due on Partnerships:		
Final Contribution Date:			Final Contribution Date:		

Schedule 5: All Securities (Including all mutual funds)					
Readily Marketable Securities		Applicant	Readily Marketable Securities		Co-applicant
No. of Shares/Face Value:	\$4,500		No. of Shares/Face Value:	7800	
Description:	Discounted Bonds <input type="checkbox"/> IRA		Description:	Mutual Funds <input type="checkbox"/> IRA	
Cost:	\$4,000		Cost:	\$14,000	
Current Market Value:	\$4,250		Current Market Value:	\$19,000	
Pledged:	<input type="checkbox"/> Yes <input type="checkbox"/> No		Pledged:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Readily Marketable Securities			Readily Marketable Securities		
No. of Shares/Face Value:	5875		No. of Shares/Face Value:		
Description:	Penny Stocks <input type="checkbox"/> IRA		Description:		<input type="checkbox"/> IRA
Cost:	\$1		Cost:		
Current Market Value:	\$9,875		Current Market Value:		
Pledged:	<input type="checkbox"/> Yes <input type="checkbox"/> No		Pledged:	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Non-Readily Marketable Securities			Non-Readily Marketable Securities		
No. of Shares/Face Value:			No. of Shares/Face Value:		
Description:		<input type="checkbox"/> IRA	Description:		<input type="checkbox"/> IRA
Cost:			Cost:		
Current Market Value:			Current Market Value:		
Pledged:	<input type="checkbox"/> Yes <input type="checkbox"/> No		Pledged:	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Non-Readily Marketable Securities			Non-Readily Marketable Securities		
No. of Shares/Face Value:			No. of Shares/Face Value:		
Description:		<input type="checkbox"/> IRA	Description:		<input type="checkbox"/> IRA
Cost:			Cost:		
Current Market Value:			Current Market Value:		
Pledged:	<input type="checkbox"/> Yes <input type="checkbox"/> No		Pledged:	<input type="checkbox"/> Yes <input type="checkbox"/> No	

**Schedule 6: Notes & Accounts Payable**

Applicant		Co-applicant	
<b>Enter Notes Payable Below (Including Installment Notes, Equity Lines/Loans, and Credit Cards)</b>			
Due To:	AltaVista Visa	Due To:	MasterBlaster MasterCard
Type of Facility:	Credit Card	Type of Facility:	Credit Card
Amount of Line:	\$10,000	Amount of Line:	\$6,000
Collateral:		Collateral:	
Interest Rate:	10.500%	Interest Rate:	9.500%
Maturity:		Maturity:	
Monthly Payment:	\$86.00	Monthly Payment:	\$50.00
Balance Outstanding:	\$2,700	Balance Outstanding:	\$1,000
<b>Enter Notes Payable Below (Including Installment Notes, Equity Lines/Loans, and Credit Cards)</b>			
Due To:		Due To:	
Type of Facility:		Type of Facility:	
Amount of Line:		Amount of Line:	
Collateral:		Collateral:	
Interest Rate:		Interest Rate:	
Maturity:		Maturity:	
Monthly Payment:		Monthly Payment:	
Balance Outstanding:		Balance Outstanding:	
<b>Enter Notes Payable Below (Including Installment Notes, Equity Lines/Loans, and Credit Cards)</b>			
Due To:		Due To:	
Type of Facility:		Type of Facility:	
Amount of Line:		Amount of Line:	
Collateral:		Collateral:	
Interest Rate:		Interest Rate:	
Maturity:		Maturity:	
Monthly Payment:		Monthly Payment:	
Balance Outstanding:		Balance Outstanding:	
<b>Enter Accounts and Bills Payable</b>			
Due To:		Due To:	
Type of Facility:		Type of Facility:	
Amount of Line:		Amount of Line:	
Collateral:		Collateral:	
Interest Rate:		Interest Rate:	
Maturity:		Maturity:	
Monthly Payment:		Monthly Payment:	
Balance Outstanding:		Balance Outstanding:	

I/we have provided this information for the purpose of obtaining or maintaining credit for myself or on behalf of a corporation, partnership or other business entity with which I am associated, or as a guarantor for another person or business entity. I/we certify that this is a true, complete, and accurate statement of my/our financial condition as of (date) 10/14/2010. I/we agree that the accuracy of this financial statement may be verified to determine my/our creditworthiness.

**Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
 David Caswell

**Co-Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
 Miriam Caswell