

## Personal Financial Statement

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Applicant: David Caswell

Co-applicant: Miriam Caswell

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"/>

<b>Personal Information</b>	
<b>Applicant</b>	<b>Co-applicant</b>
Name: <b>David Caswell</b>	Name: <b>Miriam Caswell</b>
Employer: <b>Victor Jack Insurance Co.</b>	Employer: <b>Lewis Department Store</b>
Employer Street Address: <b>210 Avenida Del Rio</b>	Employer Street Address: <b>37 Bench Row Road</b>
City, State, ZIP: <b>Yuma, AZ 85364</b>	City, State, ZIP: <b>Yuma, AZ 85364</b>
Employer Phone Number: <b>(928) 555-1212</b>	Employer Phone Number: <b>(928) 555-1212</b>
No. of Years with Employer: <b>7</b>	No. of Years with Employer: <b>2</b>
Title/Position: <b>Sales Representative</b>	Title/Position: <b>Office Manager</b>
Name of Prev. Employer:	Name of Prev. Employer: <b>Delouchrey &amp; Holleran, Attorneys at Law</b>
Position at Prev. Employer:	Position at Prev. Employer: <b>Office Manager</b>
No. of Years w/ Prev. Emp.:	No. of Years w/ Prev. Emp.: <b>5</b>
Home Street Address: <b>818 Commonage Road</b>	Home Street Address: <b>818 Commonage Road</b>
City, State, ZIP: <b>Yuma, AZ 85364</b>	City, State, ZIP: <b>Yuma, AZ 85364</b>
Home Phone: <b>(928) 555-2121</b>	Home Phone: <b>(928) 555-2121</b>
Social Security Number: <b>555 55 5555</b>	Social Security Number: <b>555 55 5555</b>
Date of Birth: <b>06/10/65</b>	Date of Birth: <b>12/05/66</b>
Inc. Tax returns filed through: <b>2003</b>	Inc. Tax returns filed through: <b>2003</b>
Any returns being audited? <b>No</b>	Any returns being audited? <b>Yes</b>
If yes, what year(s)?	If yes, what year(s)? <b>1994</b>
Any taxes past due? <b>No</b>	Any taxes past due? <b>No</b>
If yes, amount:	If yes, amount:
Ever declared bankruptcy? <b>No</b>	Ever declared bankruptcy? <b>No</b>
Have you drawn a will? <b>Yes</b>	Have you drawn a will? <b>Yes</b>
Year drawn: <b>1999</b>	Year drawn: <b>1999</b>
Name of executor: <b>Nicola May, Esq.</b>	Name of executor: <b>Scott Housemera, Esq</b>
Number of dependents: <b>0</b>	Number of dependents: <b>0</b>
Do you have financial plan? <b>Yes</b>	Do you have financial plan? <b>Yes</b>
If yes, name of planner: <b>Jason Berg, CFP</b>	If yes, name of planner: <b>Jason Berg, CFP</b>
Life Insurance - CSV: <b>\$42,000</b>	Life Insurance - CSV: <b>\$2,600</b>
Name of Insured: <b>David Caswell</b>	Name of Insured: <b>Miriam Caswell</b>
Name of Company: <b>Ayers-Carolco Insurance Co.</b>	Name of Company: <b>Ayers-Carolco Insurance Co.</b>
Policy Number: <b>55-5555-5AC</b>	Policy Number: <b>55-5555-5BC</b>
Beneficiary: <b>Miriam Caswell</b>	Beneficiary: <b>David Caswell</b>

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

Applicant		Co-applicant	
Checking Account #1	List bank and name each account is in.	Checking Account #2	List bank and name each account is in.
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>	
List bank and name each account is in.		List bank and name each account is in.	
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 checked="" type="checkbox"/> IRA	Savings Account #:	55-53452-43-9 <input checked="" 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**

<b>Applicant</b>		<b>Co-applicant</b>	
<b>Notes Receivable #1</b>	List Name & Address of Maker	<b>Notes Receivable #2</b>	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:	
<b>Notes Receivable #3</b>		<b>Notes Receivable #4</b>	
Name of Payee:	Kara Hurry	Name of Payee:	
Street Address:	34 McChilda Lane	Street Address:	
City, State, ZIP:	Vernon, BC V1T-5J5	City, State, ZIP:	
Amount:	\$1,500	Amount:	
<b>Notes Receivable #5</b>		<b>Notes Receivable #6</b>	
Name of Maker:		Name of Maker:	
Street Address:		Street Address:	
City, State, ZIP:		City, State, ZIP:	
Amount:		Amount:	
<b>Notes Receivable #7</b>		<b>Notes Receivable #8</b>	
Name of Payee:		Name of Payee:	
Street Address:		Street Address:	
City, State, ZIP:		City, State, ZIP:	
Amount:		Amount:	
<b>Notes Receivable #9</b>		<b>Notes Receivable #10</b>	
Name of Maker:		Name of Maker:	
Street Address:		Street Address:	
City, State, ZIP:		City, State, ZIP:	
Amount:		Amount:	
<b>Notes Receivable #11</b>		<b>Notes Receivable #12</b>	
Name of Payee:		Name of Payee:	
Street Address:		Street Address:	
City, State, ZIP:		City, State, ZIP:	
Amount:		Amount:	

<b>Accounts Receivable #1</b>	List Name & Address of Payee	<b>Accounts Receivable #2</b>	List Name & Address of Payee
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
<b>Accounts Receivable #3</b>		<b>Accounts Receivable #4</b>	
Name of Payee:		Name of Payee:	
Street Address:		Street Address:	
City, State, ZIP:		City, State, ZIP:	
Amount:		Amount:	
<b>Accounts Receivable #5</b>		<b>Accounts Receivable #6</b>	
Name of Maker:		Name of Maker:	
Street Address:		Street Address:	
City, State, ZIP:		City, State, ZIP:	
Amount:		Amount:	
<b>Accounts Receivable #7</b>		<b>Accounts Receivable #8</b>	
Name of Payee:		Name of Payee:	
Street Address:		Street Address:	
City, State, ZIP:		City, State, ZIP:	
Amount:		Amount:	
<b>Accounts Receivable #9</b>		<b>Accounts Receivable #10</b>	
Name of Maker:		Name of Maker:	
Street Address:		Street Address:	
City, State, ZIP:		City, State, ZIP:	
Amount:		Amount:	
<b>Accounts Receivable #11</b>		<b>Accounts Receivable #12</b>	
Name of Payee:		Name of Payee:	
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):	1/15/98	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):	4/15/96
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

<b>Schedule 6: Notes &amp; Accounts Payable</b>			
<b>Applicant</b>		<b>Co-applicant</b>	
<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) \_\_\_\_\_ . 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