STATE BANK OF FARIBAULT

Applicant Information

APPLICANT

Name_____

Social Security Number_____ Date of Birth_____

Address_____

Telephone Number_____ Cell Number_____

Drivers License Number_____ Expiration Date_____

Email Address_____

Present Employer_____Work Phone_____

Address_____

How long_____ Position_____

Previous Employer_____

How long_____ Position_____

CO-APPLICANT

Name_____

Social Security Number_____ Date of Birth_____

Address_____

Telephone Number_____ Cell Number_____

Drivers License Number_____ Expiration Date_____

Email Address_____

Present Employer_____Work Phone_____

Address_____

How long_____ Position_____

Previous Employer_____

How long_____ Position_____

Loan Purpose_____ Amount Requested_____

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PERSONAL ASSETS

If more room is needed, please attach separate list

Schedule A: Cash and Checking Balance

	Account Description	Value
Cash on Hand		
Checking		
Savings		
CD's		
Total Cash and Checking Balance		$ 0.00

Schedule B: Stocks and Bonds

Quantity	Description	In Whose Name(s) Registered	Cost Value per Share	Market Value per Share	Dividends or Interest Received	Total Cost Value	Total Market Value
Total Stocks and Bonds						$ 0.00	$ 0.00

Schedule C: Other Current Assets

Description	Quantity	Cost Value per Unit	Market Value per	Cost Value	Market Value
Total Other Current Assets				$ 0.00	$ 0.00

Schedule D: Household Furnishings and Appliances/Intangible Assets

Description	Cost Value	Market Value
Total Household Furnishings and Appliances/Intangible Assets	$ 0.00	$ 0.00

Schedule E: Personal Vehicles

Make/Model	Model Year	VIN/Serial Number	Year Purch-ased	% Ownership	Cost Value	Market Value
Total Personal Vehicles					$ 0.00	$ 0.00

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PERSONAL ASSETS

If more room is needed, please attach separate list

Schedule F: Cash Value of Life Insurance

Insured	Insurance Company	Beneficiary	Face Value of Policy	Cash Value of Policy
Total Cash Value of Life Insurance				$ 0.00

Schedule G: Retirement Accounts

Type of Plan/Description	Carrier	Owner of Account	Cost Value	Market Value
Total Retirement Plans			$ 0.00	$ 0.00

Schedule H: Personal Business Investment

Description	Source of Value	Cost Value	Market Value
Total Personal Business Investment		$ 0.00	$ 0.00

Schedule I: Personal Real Estate (Specify Homestead)

Address	Type of Property	Parcel ID	Bareland Y/N	Cost Value	Market Value
Total Personal Real Estate				$ 0.00	$ 0.00

Schedule J: Other Noncurrent Assets

Description	Quantity	Value per Unit	Cost Value	Market Value
Total Other Noncurrent Assets			$ 0.00	$ 0.00

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PERSONAL LIABILITIES

If more room is needed, please attach separate list

Schedule K: Accounts Payable and Other Accrued Expenses

To Whom Payable	Collateral or Unsecured	How Payable (Example: $500/month)	Maturity Date (mm/dd/yy)	Unpaid Balance
		$ /		
		$ /		
		$ /		
		$ /		
		$ /		
		$ /		
		$ /		
		$ /		
		$ /		
		$ /		
Total Accounts Payable				$ 0.00

Schedule L: Current Loans (12 Months or Less) Example: Credit Card Debt

Lender	Interest Rate	Origin-ation Date	Term	Last Payment Date	P & I Payment (Example: $500/month)	Month(s) Due (E = Every Month)	Maturity Date (mm/dd/yy)	Principal Balance
	0.000%				$ /			
	0.000%				$ /			
	0.000%				$ /			
	0.000%				$ /			
	0.000%				$ /			
	0.000%				$ /			
	0.000%				$ /			
	0.000%				$ /			
	0.000%				$ /			
Total Current Loans								$ 0.00

Schedule M: Noncurrent Loans (Over 12 Months) Example: Mortgage or Car Loan

Lender	Interest Rate	Origin-ation Date	Term	Last Payment Date	P & I Payment (Example: $500/month)	Month(s) Due (E = Every Month)	Maturity Date (mm/dd/yy)	Principal Balance
	0.000%				$ /			
	0.000%				$ /			
	0.000%				$ /			
	0.000%				$ /			
	0.000%				$ /			
	0.000%				$ /			
	0.000%				$ /			
	0.000%				$ /			
	0.000%				$ /			
Total Current Loans								$ 0.00

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☐ Market Value
☐ Cost Value
☐ Both

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PLEASE FILL OUT SCHEDULES FIRST, THEN CARRY BALANCES TO FRONT PAGE SUMMARY.

Personal Balance Sheet Summary

Name: _____ Date: _____

Current Assets:	**Amount**	**Current Liabilities:**	**Amount**
Cash and Checking Balance (Schedule A)	$ 0.00	Accounts Payable and Other Accrued Expenses	$ 0.00
Stocks and Bonds (Schedule B)	$ 0.00	(Schedule K)	
Other Current Assets (Schedule C)	$ 0.00	Current Loans (Schedule L)	$ 0.00
Total Current Assets	$ 0.00	Total Current Liabilities	$ 0.00

Noncurrent Assets:	**Cost value**	**Market value**	**Noncurrent Liabilities:**	**Amount**
Household Furnishings and	$ 0.00	$ 0.00	Noncurrent Loans (Schedule M)	$ 0.00
Appliances/Intangible Assets				
(Schedule D)				
Personal Vehicles (Schedule E)	$ 0.00	$ 0.00		
Cash Value of Life Insurance		$ 0.00		
(Schedule F)				
Retirement Plans (Schedule G)	$ 0.00	$ 0.00		
Personal Business Investment	$ 0.00	$ 0.00		
(Schedule H)				
Personal Real Estate (Schedule I)	$ 0.00	$ 0.00		
Other Noncurrent Assets	$ 0.00	$ 0.00		
(Schedule J)				
Total Noncurrent Assets	$ 0.00	$ 0.00	Total Noncurrent Liabilities	$ 0.00

			Total Liabilities	$ 0.00
			Net Worth	$ 0.00
Total Assets	$ 0.00	$ 0.00	Total Liabilities & Net Worth	$ 0.00

ANNUAL INCOME			**CONTINGENT LIABILITIES**		
	Applicant	Co-Applicant	To Whom	What For	Amount
Salary (Example: $30,000/year)	$ /	$ /			
Commissions	$ /	$ /			
Dividends	$ /	$ /			
Interest	$ /	$ /	Lawsuits		
Rentals	$ /	$ /	For Taxes		
Alimony/Maintenance	$ /	$ /	Other (detail)		
Child Support	$ /	$ /	Total Contingent Liabilities		$ 0.00
Bonus	$ /	$ /			
Cash Distributions	$ /	$ /	CHECK HERE IF NONE ☐		
Total Income	$ 0.00 /	$ 0.00 /			

I certify that the statements made by me on this balance sheet are true, complete, and correct to the best of my knowledge and belief.

Date _____ Signature(s)_____

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	APPLICANT		CO-APPLICANT	
Have I ever gone through bankruptcy? If yes, when? _____	☐ Yes	☐ No	☐ Yes	☐ No
Have I ever had a judgment against me?	☐ Yes	☐ No	☐ Yes	☐ No
Are any assets pledged or debts secured except as shown? If yes, what? _____	☐ Yes	☐ No	☐ Yes	☐ No
Have I made a will?	☐ Yes	☐ No	☐ Yes	☐ No
Number of dependents (if none, check "none")	_____ or	☐ None	_____ or	☐ None
Marital Status (answer only if this financial statement is provided in connection with a request for secured credit or applicant is seeking a joint account with spouse)	☐ Married ☐ Separated ☐ Unmarried		☐ Married ☐ Separated ☐ Unmarried	

(Unmarried includes single, divorced, widowed)

I/We hereby certify that this financial statement is intended for use by The State Bank of Faribault ("the Bank") at 428 Central Avenue, Faribault, MN 55021 for the purpose of obtaining credit for the Applicant(s) or for the purpose of the Applicant(s) guaranteeing credit for others. I/We further certify that all information contained therein is true and correct in every detail and represents the financial condition of the Applicant(s) on the date given below.

The Bank is authorized to make all inquiries deemed necessary to verify the accuracy of the information contained therein and to determine the creditworthiness of the undersigned. Applicant(s) will promptly notify the Bank of any subsequent changes, which would affect the accuracy of the enclosed statement. Applicant(s) are aware that any knowing or willing false statement regarding property values listed therein for purposes of influencing the action of the Bank can be a violation of federal law 18 U.S.C. sec. 1014 and may result in a fine or imprisonment or both.

In addition, each individual signing below authorizes the Bank to check his or her individual credit account and employment history and have a credit reporting agency prepare a credit report on each.

The undersigned declares that he/she has read and understands the statement above.

Applicant Signature _____ Date_____

Applicant Signature _____ Date_____

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