

Personal Financial Statement

Section 1: Applicant Information					Ī	Section 2: Co-Applicant I	nformat	ion*							
Name		Name													
D ((B) #		10 %				Date of Diale									
Date of Birth	al Security Num	iber			Date of Birth	Social S	al Security Number								
Residence Address						Residence Address									
City State		1	Zij	Zip		City		State		Zip					
Position/Occupation				Number of Years		Position/Occupation			Nun	Number of Years					
·	Number of Years								Number of Tears						
Employer Name						Employer Name									
Residential Telephone	ness Telephone			Residential Telephone		Business	s Telephone								
Nearest Relative Not Living With Me Rela		tionship	Te	lephone		Nearest Relative Not Living Wi	Relation	ship	Tele	Telephone					
Address					Address										
City	te Zip				City		State		Zip						
Driver's License/ID Number Expiration Date		Date Issued		State Issued		Driver's License/ID Number	Expirat	ion Date	Date Issue	ed	State Issued				
						*When completed and sign	·								
Section 3: Statement of Financial Co	anditi.	on				when completed and sign	nea aeno	tes your i	ntent to app	ly for	Joint Credit.				
	Jiiaiti	OII													
BALANCE SHEET AS OF:		(m	m/dd/	уууу)											
Indicate "A" (Applicant) "C" (C	Co-Ann	licant) or ".l" (.le	ointly	Held With Others)	in co	olumn next to assets and liabilities	s listed to	indicate to	whom item a	applies	<u> </u>				
ASSETS	, тър	A, C or J		Oollar Amount		IABILITIES	3 110104 10		A, C or J		ollar Amount				
Cash on Hand and In Banks (Schedule A)		, , , , ,			_	ecured Notes Payable to Banks (Schedule	E)	,						
IRAs, 401(k), Retirement Assets					U	Insecured Notes Payable to Bank	s (Schedu	ıle E)							
U.S. Gov't, Marketable Securities (Schedule	B)				D	ue to Brokers, Margin Loans (Sch	nedule E)								
Securities Held By Broker in Margin Accoun	ts				Α	mounts Payable To Others (Secu	red)								
Restricted/Control Stocks (Public Company	Only)				С	redit Cards (Schedule E)									
Real Estate Owned (Schedule C)					_	quity Lines (Schedule E)				<u> </u>					
Loans Receivable						Inpaid Taxes (Income, Property, e				<u> </u>					
Life Insurance Cash Value (Schedule D)						eal Estate Mortgages Payable (S	chedule C	(2)		<u> </u>					
Value of Closely Held Business					0	Other Debts (itemize)				<u> </u>					
Vehicles/Other Personal Property										<u> </u>					
Other Assets (itemize)					-										
					1										
					Т	OTAL LIABILITIES					\$0.00				
						ET WORTH	\$0.00								
TOTAL ASSETS				\$0.00	+	OTAL: LIABILITIES AND NET W	/ORTH				\$0.00				
											,				
INCOME & EXPENSE STATEMENT	OR T	HE YEAR EN	IDE):		(mm/dd/yyyy)									
					-										
INCOME		Applicar	ıt	Co-Applicant		XPENSES									
Salary Bonuses and Commissions						lent (Payment)									
Interest and Dividends						child Support									
Rental Income		+				uition									
Other Income (Alimony/child support need n	ot be					ERSONAL INFORMATION (Bot	n Applica	nt and Co	-Applicant)						
revealed if you do not wish to have it consid					Α	re you a U.S. Citizen? Yes	□ No								
as a basis for repaying this obligation.) TOTAL INCOME		\$(0.00	\$0.00	Δ	re you an officer or an immediate	family me	mher/den	endent of						
CONTINGENT LIABILITIES	ψο.σο ψο.σο				Are you an officer or an immediate family member/dependent of an officer of a SunTrust Banks, Inc. controlled entity?										
Do you have contingent liabilities? If Yes, desc	ribe:					Do you have a will? ☐ Yes ☐ No If Yes									
				_	Executor Name: Are you a partner or officer in another venture? Yes No If Yes,										
	-			_	re you a partner or officer in anoti Jescribe:	ıres,									
					_	ncome tax settled through (date)									
As endorser, co-maker or guarantor?					_	Are any assets pledged other than as described on schedules?					☐ No If Yes,				
On leases or contracts?					D	Describe:									
Legal claims				Α	re you a defendant in any suits or	es,									
Other special debt		1			D	escribe:									
Amount of contested income tax liens						Have you or your businesses ever been declared bankrupt?									

COMPLETE THE SCHEDULES ON THE NEXT PAGE AND PROVIDE SIGNATURE.

313225 (6/13) SunTrust Corporate Forms

SCHEDULE A: C	ash and Investn	nents															
	nt Type		Bank/Broker Name				In N	F	Pledged?				ent Balance				
											\	'es	☐ No				
											<u> </u>		☐ No	_			
													□ No	_			
		+									/ /		□ No				
											1 📙 /		□ No	_			
						L						_	TOTAL			\$(0.00
SCHEDULE B: U	.S. Government	and Marketa	able	Securi	ties												
Number of Shares		escription				In Name	Of		Pledg	ed?	Da	te of \	Value			Value	
									Yes	☐ No							
									Yes	□ No							
									Yes	□ No							
								L	Yes	☐ No		_	TOTAL			\$1	0.00
SCHEDULE C: R	oal Estato Owno	ad (Notae If an	nlinal	ble list	additional real	actata a	n Sahadula C A	ddondi	um /For	m 2494	E4) and			otolo	bolow		0.00
SCHEDULE C. K	teal Estate Owne	eu (Note: if ap		·	(2) Property De	scription		agenat	um (For	11 3 16 1	<u>34)</u> and	ente	Sub-t	otais	below		
(1) Ty			Type	e: Comm	ercial (C), Reside Lot. Office. Renta	Agricultural (A).		(3)	(4)				(5)				
Prop	erty Address		Size: Square Footage.							Cost			Date Acquired			t Market Valu	ıe
1		Тур	ре		Use		Size										
2																	
3			_								+			-			
5																	
6							_)		0.1	11.0						
								Sub-10	otal (fron GF	n Sche		Adde	naum)			\$(0.00
					(-)		(8)			(9)		(10)				(11)	
Ler	(6) nder Name			Nar	(7) me on Title		Mortgage			Monthl			Month	ly Re	ntal	Ownersh	
1							Balance			Payme	nt		Inc	come		Percenta	ige %
2																	%
3																	%
5																	%
																	%
5							Sub-Total (fr				ndum)				\$0.00		
5 6	ife Insurance Ca	arried (Includ	ling \	Whole	Life and Gro	un İnsu	,		hedule (ndum)				\$0.00		
5		arried (Includ		Whole		up Insu	rance)	GRAND		-	,	licy L	oans			Surrender V	%
5 6 SCHEDULE D: L				Whole			rance)	GRAND	D TOTA	-	,	licy L	oans			Surrender V	%
5 6 SCHEDULE D: L				Whole			rance)	GRAND	D TOTA	-	,	licy L	oans.			Surrender V	%
5 6 SCHEDULE D: L				Whole			rance)	GRAND	D TOTA	-	,	licy L	oans			Surrender V	%
5 6 SCHEDULE D: L				Whole			rance)	GRAND	D TOTA	-	,	licy L	oans	AL			%
5 6 SCHEDULE D: L	any Name	Policy Ow	ner		Bi	eneficiary	rance)	Face	Amount	-	Pc		тот		Cash		% alue
SCHEDULE D: L Insurance Compa	anks/Finance Co	Policy Ow ompanies W	here		t Has Been O	eneficiary	rance)	Face	Amount		Pc	1	ТОТ	urren	Cash		% alue
SCHEDULE D: L Insurance Compa SCHEDULE E: B	anks/Finance Co	Policy Ow ompanies W	here	e Credit	t Has Been O	eneficiary	rance)	Face	Amount		Pc	1	ТОТ		Cash	\$	% alue
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SCHEDULE D: L Insurance Compa SCHEDULE E: B Lender	anks/Finance Co	ompanies W	here	e Credit	t Has Been O	btained (Line o	Type Credit, Term Loan)	Face Ma Line	Amount aximum e Amount	nt	Monthly	/ / nt	TOT C B	urrent alance	Cash t e	\$ Maturity	% alue
SCHEDULE D: L Insurance Compa SCHEDULE E: B Lender	anks/Finance Co	ompanies W Col	here hhere	e Credital Descri	t Has Been O iption	btained (Line or	Type Credit, Term Loan)	Face Ma Line	Amount aximum le Amount e Amou	authori	Monthly Paymer	/ / nt	TOT C:B:	urrent alance \$0 or ar	Cash ttee	Maturity ate, subsidial	% alue
SCHEDULE D: L Insurance Compa SCHEDULE E: B Lender I It is my/our inter other entity related to	anks/Finance Contains to apply for individual thereto ("Lender") to	ompanies W Col	here latera	e Credit	t Has Been O iption	btained (Line of the control of the	Type Credit, Term Loan) hereby instructs mation relating to	Face Ma Line , conse b their in	Amount aximum e Amount e Amoun	authori I credit	Monthly Paymer TOTAL zes Sun status ii	rust	TOT C: B:	urrent alance \$0 or ar	Cash t e D.00 ny affiliacumstal	Maturity ate, subsidian	% alue
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