

Important: Read these directions before completing this Statement:

- If you are applying for individual credit in your own name and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete only Sections 1, 3, and 4. Please include account numbers where applicable (Credit Cards, Mortgages, etc.).
- If you are applying for joint credit with another person, complete all Sections, providing information in Section 2 about the joint applicant.
- If you are applying for individual credit, but are relying on income from alimony, child support, or separate maintenance, or on the income or assets of another person as a basis for repayment of the credit requested, complete all Sections, providing information in Section 2 about the person whose alimony, support, maintenance payments you are relying.
- If this statement relates to your guaranty of the indebtedness of other person(s), firm(s), or corporation(s), complete Sections 1, 3, 4.

TO: COMMUNITY FIRST BANK OF INDIANA
201 WEST SYCAMORE ST., KOKOMO, IN 46901

SECTION 1 - INDIVIDUAL INFORMATION (Type or Print)			SECTION 2 - INDIVIDUAL INFORMATION (Type or Print)		
Name			Name		
Residence Address			Residence Address		
City, State & Zip			City, State & Zip		
Position or Occupation			Position or Occupation		
Business Name			Business Name		
Business Address			Business Address		
City, State & Zip			City, State & Zip		
Res. Phone		Bus. Phone	Res. Phone		Bus. Phone
Email			Email		
Cell Phone			Cell Phone		
SECTION 3 - STATEMENT OF FINANCIAL CONDITION AS OF:			2008		
ASSETS (Do not include Assets of doubtful value)		In Dollars (Omit cents)	LIABILITIES		In Dollars (Omit cents)
Cash on hand and in banks - see Schedule A			Notes payable to banks-secured-see Schedule H		
U.S. Gov't & Marketable Securities - see Schedule B			Notes payable to banks-unsecured-see Schedule H		
Non-Marketable Securities - see Schedule C			Due to brokers-see Schedule H		
Securities held by broker in margin accounts			Amounts payable to others -secured-see Schedule H		
Restricted or control stocks			Amounts payable to others -unsecured-see Schedule H		
Real Estate Owned - see Schedule D			Accounts and bills due		
Loans Receivable			Unpaid income tax		
Automobiles and other personal property			Other unpaid taxes and interest		
Cash value-life insurance-see Schedule E			Real estate mortgages payable -see Schedule D&H		
Vested Interest in deferred comp/profit-sharing plans-see Schedule F			Credit Cards		
Business Ventures-see Schedule G			Other Liabilities-itemize		
			TOTAL Liabilities		-
			NET WORTH		-
TOTAL ASSETS		-	TOTAL LIABILITIES AND NET WORTH		-
SECTION 4					
Annual Income	Individual	Other Party	Annual Expenditures (Excluding ordinary living expenses)		
Salary			Individual	Other Party	
Securities Income			Mortgage		
Rentals			Rent Income Taxes		
Other (describe) I understand that I need not reveal income from alimony, child support or separate maintenance, unless I want the bank to consider it when evaluating this statement.			Insurance Premiums		
			Property Taxes		
1.			Alimony, child support or separate maintenance		
2.			Other (describe) Include installment payments other than real estate		
3.			1.		
4.			2.		
			3.		
Total Income \$	-		Total Expenditures \$		-
Less - Total Expenditures \$	-		Contingent Liabilities (Debts on which I am or my spouse is comaker, guarantor, or endorser and obligations which either of us will have to pay if the person primarily liable does not pay.)		
Net Cash Income (Excl of ordinary living exp) \$	-		1.		
Is any of this income likely to be reduced or interrupted before the credit requested is paid off ____yes ____no If yes, how long will be interruption or reduction last?			2.		
			3.		
			Total \$		-

(Complete schedules on page 2 and sign)

Schedule A - Cash, Checking and Savings Accounts, Certificates of Deposit, Money Market Funds, ETC.

Name of Financial Institution	Type of Account	Owner	Joint?	If Pledged, to Whom?	Balance

Schedule B - U.S. Government & Marketable Securities (Use additional sheet if necessary)

# of Shares or Face Value of Bonds	Description	In the Name of	Are These Registered, Pledged or Held by Others?	Value	Method of Valuation

Schedule C - Non-Marketable Securities (Use additional sheet if necessary)

Number of Shares	Description	In the Name of	Are These Registered, Pledged or Held by Others?	Value	Method of Valuation

Schedule D - Investments in Real Estate, Including Residence (Use additional sheet if necessary)

Description/Location of Real Estate Investment	Joint	Date of Invest.	Amount	% Owned by you	Mkt Value of your Investment	Present Balance	Monthly Pmt	Maturity Date	Mtg Owed To

Schedule E - Life Insurance Carried Including Group Insurance

Name of Insurance Company	Owner of Policy	Beneficiary and Relationship	Face Amount	Policy Loans	Cash Surrender Value

Schedule F - Vested Interest in Deferred Compensation/Profit-Sharing Plans

Company Name	% Vested	Account Number	Payout Manner (Lump Sum, Annuity, etc.)	Distr. Date	Beneficiary	Amount

Schedule G - Business Ventures (Use additional sheets if necessary)

List Name and Address of Any Business Venture in Which You Are a Principal or Partner	Position/ Title in the Business	Line of Business	Years in Business	Total Assets Listed in Section 3	Your % Ownership	Net Worth of Business	Present Net Value of Your Investment

Schedule H - Loans owed to Banks, Brokers, Finance Companies, and Others (VISA, AMEX, ETC.)

Owing to (Acct #)	Date of Borrowing	Amount	Present Balance	Due	Monthly Payment	Final Pay Date	Secured By

The information contained in this statement is provided to induce you to extend or to continue the extension of credit to the undersigned or to others upon the guaranty of the undersigned. The undersigned acknowledges and understands that you are relying on the information provided herein in deciding to grant or continue credit or to accept a guaranty thereof. Each of the undersigned represents, warrants, and certifies that (1) the information provided here is true, correct, and complete and gives a correct and complete showing of the financial condition of the undersigned, (2) the undersigned has no liabilities direct, indirect or contingent except as set forth in this statement, and (3) legal and equitable title to all assets herein is in the undersigned's sole name, except as may be herein as otherwise noted. Each of the undersigned agrees to notify you immediately and in writing of any change in name, address, or employment and of any material adverse change (1) in any of the information contained in this statement or (2) in the financial condition of any of the undersigned or (3) in the ability of any of the undersigned to perform its (or their) obligations to you. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement.

You are authorized to make all inquiries you deem necessary to verify the accuracy of the information contained herein, and to determine the credit-worthiness of the undersigned and the undersigned hereby authorizes all persons of whom you make such inquiries to respond thereto in full. Each of the undersigned authorizes you to answer questions about your credit experience with the undersigned.

Date Signed _____ Signature (individual) _____

SSN _____ DOB _____

Date Signed _____ Signature (individual) _____

SSN _____ DOB _____