

FINANCIAL STATEMENT - INDIVIDUAL

INDIVIDUAL
 JOINT

DATE OF STATEMENT

TO FINANCIAL INSTITUTION NAMED:	NAME OF INDIVIDUAL:
<p>First National Bank & Trust Company PO Box 70 Broken Arrow, OK 74013-0070</p>	

HOME ADDRESS	HOME PHONE	SOCIAL SECURITY NUMBER	DATE OF BIRTH
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ASSETS		LIABILITIES	
Cash in This Financial Institution (Schedule A)		Notes Payable to Financial Institutions (Schedule J)	
Cash in Other Financial Institutions (Schedule A)		Other Notes Payable (Schedule J)	
Money Market Accounts (Schedule A)		Loans Secured by Real Estate (Schedule F)	
Notes and Loans Receivable (Schedule B)		Life Insurance Policy Loans (Schedule E)	
Other Accounts Due Me (Schedule B)		Taxes (Federal, State, Local) Due and Unpaid	
Stocks and Bonds - Marketable (Schedule C)		Credit Card Indebtedness	
Other Stocks and Bonds (Schedule C)		Due to Brokers in Margin Accounts (Schedule K)	
Partnership and Proprietorship Interests (Schedule D)		Other Accounts and Bills Payable (Schedule K)	
Cash Surrender Value Life Insurance (Schedule E)			
Real Estate Owned (Schedule F)			
Oil and Gas Interests (Schedule G)			
Vested Pension and Retirement Funds (Schedule H)			
IRA and Keough Plans (Schedule H)			
Other Personal Assets (Schedule I)			
		<i>TOTAL LIABILITIES</i>	
		NET WORTH	
<i>TOTAL ASSETS</i>		<i>TOTAL LIABILITIES and NET WORTH</i>	

INCOME AND EXPENSE for year ending _____			
Salaries and Wages		Interest Paid	
Commissions and Bonuses		Rent Paid	
Interest Income		Federal and State Income Taxes	
Dividend Income		Other Taxes	
Business Income		Alimony, Child Support, Other Maintenance Paid	
Pensions, Annuities, Retirement and Social Security			
Rents			
Alimony, Child Support and Separate Maintenance <i>(Exclude if you do not wish this income to be considered as a basis for repaying any obligation)</i>			
Other Income			
<i>TOTAL ALL INCOME</i>		<i>TOTAL</i>	

Federal Income Tax Return has been filed Through _____ (tax year) Any Additional Assessments? No Yes Amount \$ _____

CONTINGENT LIABILITIES		
NATURE OF LIABILITY	DESCRIPTION	AMOUNT
Liabilities as Endorser, Co-Maker or Guarantor		
Liabilities on Leases and Contracts		
Liabilities on Letters of Credit		
Contested Tax Liens		
Involvement in Pending Legal Actions, Claims Judgments, etc.		

SCHEDULE E: LIFE INSURANCE							
INSURANCE COMPANY	POLICY NUMBER	POLICY OWNER	BENEFICIARY	POLICY TYPE	FACE AMOUNT	CASH VALUE	LOANS AGAINST POLICY

SCHEDULE F: REAL ESTATE OWNED (✓ Indicates Homestead)								
PARCEL NUMBER	LOCATION and DESCRIPTION OF IMPROVEMENTS	✓	YEARS ACQUIRED	COST	APPRAISAL			NAME OF TITLE HOLDER
					By Whom	Date	Amount	
1.								
2.								
3.								
4.								
5.								

PARCEL NUMBER	MORTGAGE OR OTHER LIEN	PAYABLE TO	ORIGINAL AMOUNT	PRESENT BALANCE	INTEREST RATE	AMOUNT PAYABLE PER MONTH	AMOUNT OF INSURANCE
1.	1ST						
	2ND						
2.	1ST						
	2ND						
3.	1ST						
	2ND						
4.	1ST						
	2ND						
5.	1ST						
	2ND						

SCHEDULE G: OIL and GAS INTERESTS							
LEGAL DESCRIPTION	WI OR RI	NET REVENUE INTEREST	MONTHLY INCOME	MONTHLY EXPENSE	PRESENT VALUE	PURCHASER OF PRODUCT	

SCHEDULE H: VESTED PENSIONS, RETIREMENT FUNDS, IRA, KEOUGH		SCHEDULE I: OTHER PERSONAL ASSETS	
DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT

