

OMB APPROVAL NO.: 3245-0188 EXPIRATION DATE: 03/31/2021

PERSONAL FINANCIAL STATEMENT 7(a) / 504 LOANS AND SURETY BONDS

U.S. SMALL BUSINESS ADMINISTRATION

As of,

SBA uses the information required by this Form 413 as one of a number of data sources in analyzing the repayment ability and creditworthiness of an application for an SBA guaranteed 7(a) or 504 loan or, with respect to a surety bond, to assist in recovery in the event that the contractor defaults on the contract. Submission of this information is required as part of your application for assistance. Failure to provide the information would impact the agency's decision on your application.

Complete this form for: (1) each proprietor; (2) general partner; (3) managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant (including the assets of the owner's spouse and any minor children); and (5) any person providing a guaranty on the loan

Return completed form to:

For 7(a) loans: the Lender processing the application for SBA guaranty

For 504 loans: the Certified Development Company (CDC) processing the application for SBA guaranty For Surety Bonds: the Surety Company or Agent processing the application for surety bond guarantee

Name							
Home Address							
City, State, & Zip Code							
Business Name of Applicant							
ASSETS (Omit Cents)	LIABILITIES (Omit Cents)						
Cash on Hand & in banks	Accounts Payable						
Section 1. Source of Income.	Contingent Liabilities						
Salary\$ Net Investment Income\$ Real Estate Income\$ Other Income (Describe below)*\$	Legal Claims & Judgments\$						
Description of Other Income in Section 1.							

^{*}Alimony or child support payments should not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

Section 2. Notes Paya			Original	Current		1			itatement and signed.) red or Endorsed
Names and Addresses of Noteholder(s)		Balance	Balance					of Collateral	
_									
Section 2 Stocks on	d Dane	lo /11#				:-!4:6:!			1.)
Section 3. Stocks and	1	`		T		t Value		ite of	<u>′</u>
Number of Shares	N	Name of Securities		Cost				n/Exchange	Total Value
Section 4. Real Estate and signed.)	Owne	d. (List ea	ch parcel separa	ately. Use attacl	nment if necessary	. Each attachn	nent must be i	identified as a pa	rt of this statement
			Property	Α	F	Property B		Property C	
Type of Real Estate (e.g. Primary Residence, Other Residence, Rental Property, Land, etc.)									
Address									
Date Purchased									
Original Cost									
Present Market Value									
Name & Address of Mortgage Holder									
Mortgage Account Num	nber								
Mortgage Balance									
Amount of Payment pe Month/Year	r								
Status of Mortgage									
Section 5. Other Personal holder, amount of lien,							s security, s	tate name and	d address of lien
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Castian C. Honaid T		/Dagarila	a in datail an	4-4		ule are also a			and if any a tax
Section 6. Unpaid Tallien attaches.)	axes.	(Describe	e in detail as	to type, to w	nom payable, \	vnen due, a	mount, and	to what prop	perty, ir any, a tax

Section 7. Other Liabilities. (Describe in detail.)	
Section 8. Life Insurance Held. (Give face amount and cash surrer	der value of nolicies – name of insurance company and
Beneficiaries.)	der value of policies – flame of insurance company and
,	
Lauthariza the CDA/Landar/Curaty Company to make inquiries as page	and the verification and the statements made and to
I authorize the SBA/Lender/Surety Company to make inquiries as nece determine my creditworthiness.	ssary to verily the accuracy of the statements made and to
•	and the array of any 200/ or
CERTIFICATION : (to be completed by each person submitting the informore owner when spousal assets are included)	rmation requested on this form and the spouse of any 20% of
·	
By signing this form, I certify under penalty of criminal prosecution that information submitted with this form is true and complete to the best of	, , , , , , , , , , , , , , , , , , , ,
Lenders or Certified Development Companies or Surety Companies will	
application for a loan or a surety bond. I further certify that I have read	•
Signature	Date
Print Name	Social Security No.
Signature	Date
Print Name	Social Security No.
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NOTICE TO LOAN AND SURETY BOND APPLICANTS: CRIMINAL PENALITIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant civil penalties, and a denial of your loan or surety bond application. A false statement is punishable under 18 U.S.C. §§ 1001 and 3571 by imprisonment of not more than five years and/or a fine of up to \$250,000; under 15 U.S.C. § 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a Federally-insured institution, a false statement is punishable under 18 U.S.C. § 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000. Additionally, false statements can lead to treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729, and other administrative remedies including suspension and debarment.

PLEASE NOTE:

According to the Paperwork Reduction Act, you are not required to respond to this request for information unless it displays a valid OMB Control Number. The estimated average burden hours for the completion of this form is 1.5 hours per response. If you have questions or comments concerning this estimate or any other aspect of this information collection, please contact: Director, Records Management Division, Small Business Administration, 409 Third Street SW, Washington, D.C. 20416, and SBA Desk Officer, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20503. PLEASE DO NOT SEND COMPLETED FORMS TO OMB.