

Financial Statement



NAME OF COMPANY

DATE

CUR	RENT ASSETS:	Cı	urrent Year 12/31/	_ La	ast Year 12/31/
1.	Cash (Schedule A)	-		_	
2.	Investments	-		_	
3.	Receivables	-		_	
	a) Fees Receivable			_	
	b) Other Receivable				
	 c) Totals Receivable d) Less: Allowance for 	TT 11 .11 1			
	d) Less: Allowance for	Uncollectible			
	e) Net Receivables				
4.	Expenses	-		_	
5.	Other Current Assets	-		_	
6.	Total Current Assets	-		_	
NON	-CURRENT ASSETS:				
	-CURRENT ASSETS.				
7.	Investments	-		_	
8.	Receivables	-		_	
9.	Organization Expenses	-		_	
10.	Other Non-Current Assets	-		_	
11.	Total Non-Current Assets	-		_	
FIXI	ED ASSETS:				
12.	Office Furnishings and Equipment				
13.	Automobiles				
14.	Total Furn., Equip. and Autos				
15.	Less: Accumulated Depreciation				
16.	Net Furn., Equip. and Autos	-		_	
17.	Leasehold Improvements	-		-	
18.	Less: Accumulated Amortization	-		-	
19. 20.	Net Leasehold Improvements Real Estate	-		_	
20. 21.	Less: Accumulated Depreciation	-			
21. 22.	Net Real Estate	-		-	
22.	Other (Identify)	-		-	
<i>2</i> J.		-		_	
24.	Total Fixed Assets	-		_	
25.	TOTAL ASSETS	\$		\$	
<i>23</i> .	IVIAL ASSE 15	Ψ		Ψ	

NOTE: Details of items 3b, 4, 5, 7, 8, 10, and 23 must be attached.







Limited Risk









E OF C	STATEMENT OF OPERAT			INGS	DATE
INCO	OME	С	urrent Year 12/31/	L	ast Year 12/31/
1.	Earned Fees				
2.	Net Investment Income Earned				
3.	Net Realized Capital Gains (or Losses)				
4.	All Other Income*				
5.	Total Income				
EXP	ENSES				
6.	Fees Paid				
7.	Salaries				
8.	General Expenses				
9.	Total Operating Expenses				
10.	Federal and State Income Taxes				
NET	INCOME AND RETAINED EARNINGS				
11.	Net Income				
12.	Retained Earnings, December 31st Previous Year				
13.	Less: Distributions to Stockholders				
14.	RETAINED EARNINGS, DECEMBER 31, CURRENT YEAR	\$		\$	

NOTE: Details of items 4 must be attached.





NAME OF COMPANY

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SCHEDULE A - CASH ON HAND AND ON DEPOSIT

List all accounts and locations of Cash on Hand. Place an asterisk (*) in the D/T/C/* column if all or any part of the deposit balance is assigned as collateral for a loan or is otherwise pledged or restricted. Attach supporting statement with explanation of pledge or restriction.

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Total Cash On Deposit	\$	
Cash On Hand (Petty Cash)		
Total Cash (Line 1, Page 1, Current Year)	\$	

D = Demand, T = Time, C = Cash







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SCHEDULE B - GENERAL EXPENSES

Advertising	\$
Accounting and Auditing	\$
Auto Expense	\$
Bad Debt Expense	\$
Building Maintenance and Repair	\$
Consulting Fees	\$
Depreciation and Amortization	\$
Employee Benefits	\$
Equipment Maintenance and Repair	\$
Equipment Rental	\$
Insurance	\$
Interest	\$
Legal Fees	\$
Office Supplies and Expenses	\$
Printing	\$
Postage and Freight	\$
Rent and Related Items	\$
Taxes: Payroll	\$
Property	\$
Other Taxes, Licenses and Fees	\$
Telephone	\$
Travel and Entertainment	\$
Utilities	\$
Other (List)	\$
Total	\$

Limited Risk







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DIRECTIONS FOR ATTESTING TO THIS APPLICATION:

- a. If applicant is a sole proprietor, the application must be sworn by the sole proprietor.
- b. If applicant is a partnership, the application must be sworn by the principal partners or by all officers and directors.
- c. If applicant is a corporation, the application must be sworn by the president and secretary.

FOLLOWING ATTESTION FORM SHALL BE USED:

I do solemnly swear or affirm that all the foregoing information and documentary evidence submitted is true, complete and correct to the best of my knowledge and belief.

Company	Sworn to and Subscribed before Me
Signature	this,
Print Name	(Notary Public)
Print Title	

Please submit all documents as one attachment for each category as one pdf, this will expedite processing of your application.