## **Individual Financial Statement**

Important: Date and Sign Statement

Address						
To WISCONSIN RIVER BANK PO BOX 636, SAUK CIT	Y, WI 53583-0636					
For the purpose of obtaining credit from Lender and any future the following statement to Lender of my financial condition on	credit granted by Lendo		en, I make			
For Wisconsin residents only: 1 am	□ unmarried	☐ Legally separated Address				
NOTICE TO MARRIED APPLICANTS: No provisions of any mari Wis. Stats., adversely affects the interest of the creditor unless the credi the agreement, statement or decree or has actual knowledge of the adver	tor, prior to the time the co					
INSTRUCTIONS FOR INFORMATION TO BE SUPPLIED BELO	ow:					
<ul> <li>☐ Individual Credit. If a married applicant is applying individual property of the aplicant, but do not include individual property of the applicant, but do not include individual property of the applicant must sign on page 2.</li> <li>☐ Joint Credit with spouse as joint applicant,. If married applicant, is applying the property of the property of the applicant is applying individual property of the applicant, applying the property of the applicant is applying individual property of the applicant, but do not include individual property of the applicant, but do not include individual property of the applicant, but do not include individual property of the applicant, but do not include individual property of the applicant, but do not include individual property of the applicant individual property of the applicant, but do not include individual property of the applicant individual property of the applicant</li></ul>	vidual property of the	non-applicant spouse. Include all liabilities of	both spouses. Only			
spouses. Both spouses must sign this statement.  Joint Credit with		who is not your spouse. If a married applicant i				
credit with someone other than his or her spouse, each appl						
marital property and all individual property of the applicabilities of the applicant and the applicant's spouse. Only			spouse. Include all			
For purposes of this statement:  Marital property means assets acquired with my or my spou Individual property means property owned (whether in joint or prior to 1-1-86, however acquired, and property acquired	or sole name) by me prior	to marriage, prior to establishing residence in Wisconsis	n,			
COMPLETE ALL BLANKS, W	RITING "NO" OR "NO	NE" WHERE NECESSARY				
ASSETS		LIABILITIES OF APPLICANT AND SPOUSE	¢			
Cash on Hand and in Financial Institutions (Schedule A) Gov't. and Listed Securities (Schedule B)	S	Notes Payable - Lenders/Secured (Schedule E)  Notes Payable - Lenders/Unsecured (Schedule E)	\$			
Unlisted Securities & Mutual Funds (Schedule B)		Notes Payable Others (Schedule E)				
Notes and Loans Receivable (Schedule F)		Life Insurance Loans (Schedule C)	1			
Homestead and Real Estate Owned (Schedule D)		Due to Brokers				
Automobiles		Accounts Payable				
Household Personal Property  Cash Value Life Insurance (Schedule C)		Unpaid Income Taxes  Real Estate Mortgages Payable (Schedule D)				
Securities Held by Brokers in Margin Accts.		Real Estate Taxes				
Equity in Proprietorship		Credit Cards				
Equity in LLC, Partnership or Corporation IRA's & Roth IRA's		Other Debts (Itemize Below)				
Retirement Accounts (401k, SIMPLE Plan, & Other Plan)						
Other Assets: (Itemize Below)						
Recreational Items:		Total Liabilities	\$			
		Assets Less Liabilities = Net Worth				
TOTAL ASSETS	\$	TOTAL LIABILITIES AND NET WORTH S				
SOURCE OF INCOME FOR YEAR ENDED		CONTINGENT LIABILITIES OF APPLICANT AND SPOUSE				
Salaries & Bonuses *	\$	As Endorser, Co-Maker, or Guarantor	\$			
	\$	On Lease or Contracts	\$			
Commissions Dividends & Interest	\$ \$	Legal Claims Other (describe)	\$			
Real Estate	\$	Other (describe)	<b>5</b>			
Other **	S					
* For Married Wisconsin residents, name each spouse and include the ** Income from Alimony, Child Support or Separate Maintenance incomeed not be revealed if you do not wish the Lender to consider this income.  PERSONAL INFORMATION	ome and income from med	ical insurance, disability or wage continuation insurance ur creditworthiness.				
Home Phone	Social Security	Date of Birth				
Work Phone	Spouses Social Security	Date of Birth				
Employer(s) of Applicant(s)	Email Email	Date of Billin				
Are any assets pledged or restricted other than indicated on following so	THE RESIDENCE TO SHARE THE PARTY OF THE PART	If so, describe				
Are you a defendant in any legal actions or suits?   Yes  No If so,		1 30, 46301100.				
Are you a partner or officer in any other venture? $\Box$ Yes $\Box$ No If so,						
Do you have a will? $\square$ Yes $\square$ No If so, name of Personal Represent						
Have you ever been declared Bankrupt? $\square$ Yes $\square$ No If so, describe.						
Driveer's License, (or if checked below, State ID Card) Name, No., State	e and Expiration Date:					
☐ State ID Card						
☐ State ID Card						
Changed Name on Driver's License or State ID Card in Past 5 Y	ears □No □Ves ar	nd give Prior Name				
changed frame on Differ a Dicense of State ID Card in 1 ast 3 1		nd give Prior Name				

COMPLETE SCHEDULES AND SIGN ON REVERSE

Schedule A - Cash, Cl Type Name of Fina	hecking Accounts, Sa ncial Institution	vings Accounts, &	Amount				Plec Yes	lged No	
			\$						
chedule B - U.S. Go	vernment, Listed, &	Unlisted Securities	(List on Separate sh	eet if necessar	y)				
No. of Shares or Description* Face Value (Of Bonds)		Owner		Market Value		Plea Yes	iged No		
						3			
Schedule C - Life Ins	re Restricted By Contrac urance Carried, Incl								NA PAUNE
ace Amount	Name of Company		Owner		Beneficiary			Value	RRENDE Loans
Schedule D - Real Es									
Address & Property Type	e	Date Acquired	Owner		Cost	Market Value	Mort Amount	Payment	Insurance
Schedule E - Names of Banks or Other Lenders Name & Address of Lender		Borrower	Date Made	Date Made Due High Pa		Payment			Sec. Or
					Credit \$	\$	S Bala	ince	Unsec.
Schedule F - Notes a	nd Loans Receivable								
Unpaid Amount	Name of	Maker		Date Made			Security Plea	iged	
NOTICE: We m	nay report informa	tion about your	account to credit	bureaus. La	ite paymei	nts, misse	d payments	s, or othe	r defaul
	may be reflected in cial statement is true a	•		nts to verify the	information	obtained in t	his statement	and to obta	in additio
information concerning verification. I authorize	my financial condition, Lender to furnish such with Lender, to the exten	including, without lin information and any o	mitation, consumer credi	it reports, althou	gh Lender mag and to answe	y rely on this r any question	financial state ns about my cr	ment withou edit experies	it any furth
It may be a crime punis federal and state law.	shable by a fine or impr	isonment or both to k	knowingly make false st	atements concern	ning any of th	e above info	rmation, under	provisions	of applica
(Date Signed)				Х	Applicant Signature				
				x	Co-Applica	ant Spouse Sig	gnature (joint o	credit only)	
				to give notic	Wisconsin re	esident. I und it transaction	derstand Lende to my spouse. of my marriag	r may be red	
				x		Applican	t Signature		