





Company Financial Statement

CONTINGENT LIABILITIES (not already included) If none, so state.

On Acceptances, Contracts or Notes Discounted or Sold \$
As Guarantor or Endorser for \$
For Merchandise Consigned by Suppliers \$
Otherwise (describe) \$
Are any book account sold or assigned? Yes No
Amount \$

To whom?
With Recourse? Yes No

COMMITMENTS:
Approximate Purchase Commitments \$
Approximate Unfilled Orders on Hand \$

Describe any other unusual commitments

Has full provision been made on this statement for all doubtful receivables from customers and are the foregoing valuations on them conservative? Yes No

Are any assets pledged or any debts secured except as indicated? Yes No If so, please itemize by debt and security.

Are there any judgments, suits, or any claims for tax deficiencies now pending or in prospect against the corporation? Explain

OPERATING RECORD FROM / / (mm/dd/yy) TO / / (mm/dd/yy):

If profit and loss statement does not fit your business, please attach a statement on your own form.

Table with columns for financial items (Net Sales, Cost of Goods Sold, etc.) and their dollar amounts, alongside reconciliation of surplus items (Surplus at beginning, Net Profit, etc.).

Table for MONTHLY SALES with columns for months (Jan-Dec) and rows for Total Depreciation and Amortization, Deductions for Bad Accounts, and Salaries to Executive Officers.

Complete the following. Include the supporting schedules.

OTHER BANKS USED:

Table with columns: Name, City, Do you borrow there? (Yes/No), Maximum Debt Past Year (\$).



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RENTAL : Does company rent? Yes \_\_\_ No \_\_\_
Present monthly rental paid \$ \_\_\_
Date of expiration of lease \_\_\_/\_\_\_/\_\_\_

CORPORATE INFORMATION : Under laws of what state are you incorporated:
Are all franchise taxes current? Yes \_\_\_ No \_\_\_
Are you authorized to do business in Arizona? Yes \_\_\_ No \_\_\_
Have all other legal requirements been met? Yes \_\_\_ No \_\_\_

No. of authorized common shares \_\_\_ Outstanding \_\_\_ Par value \$ \_\_\_
Year last div. paid \_\_\_ Annual rate if established \$ \_\_\_ No. of authorized pfd. shares \_\_\_
Outstanding \_\_\_ Par value \$ \_\_\_ Dividend preference \$ \_\_\_ Cumulative? \_\_\_
Div. Pd. to \_\_\_
Please list any trade styles used by the corporation \_\_\_

SCHEDULE 1 - INSURANCE

Table with 4 columns: Insurance Type, Amount (\$), Insurance Type, Amount (\$). Rows include Fire Insurance, On Merchandise, On Mach'y, Equipt. and Fixtures, On Buildings, Liability Insurance, Public Liability on Owned Autos, Property Damage on Owned Autos, P.L. and P.D. on Non-owned Autos, Building & Elevator Pub. Liab.

Check all that are applicable to the coverage the corporation carries:

- Explosion Ins. [ ] Auto Collision [ ] Business Interruption [ ]
Riot and Strike [ ] Auto, Fire, Theft [ ] Robbery or Burglary [ ]
Steam Boiler [ ] Workmen's Comp [ ] Products Liability [ ]
Machinery Breakdown [ ]

Is the extended coverage endorsement attached to fire policies? Yes \_\_\_ No \_\_\_
Do any policies contain a coinsurance clause? Yes \_\_\_ No \_\_\_ Basis \_\_\_%
Is any insurance on a monthly reporting basis? Yes \_\_\_ No \_\_\_
Are employees having custody or control of property adequately bonded? Yes \_\_\_ No \_\_\_

Insurance on Lives of Officers, Directors or Other Executives Naming the Corporation as Beneficiary:

Table with 5 columns: Name of Insured, Amt. of Policy, Cash Value, Amt. of Loans, Net Cash Value. Includes summary rows for total values.

SCHEDULE 2 - OFFICERS, DIRECTORS AND PRINCIPAL STOCKHOLDERS

Table with 6 columns: Name, Title, Shares Owned (Preferred, Common), Officers and Stockholders Accts (Due to Corp, Due from Corp).



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SCHEDULE 3 - SECURITIES OWNED Please attach separate schedule if needed.

Table with 5 main columns: Stocks-Shares, Bond-Amounts; Description; Value at Which Carried on Corp.'s Books; Current Mkt. on Listed; Estimated Value on Unlisted. Sub-columns include @, Amount, and Yearly Div.

SCHEDULE 4 - REAL ESTATE AND BUILDINGS (Please give details of encumbrances on Schedule 5 opposite proper Parcel No.)

Table with 7 main columns: Parcel; Location and Description; Monthly Income; Title in Name of; Valuation on Corp.'s Books; Amount of Encumbrances; Assessed Valuation. Sub-columns include Land and Improvements.

Please designate by Parcel No. those properties used in the business \_\_\_\_\_

Are taxes delinquent on any of your properties? \_\_\_\_\_ If so, please give amount and details \_\_\_\_\_

SCHEDULE 5 - REAL ESTATE ENCUMBRANCES

Table with 7 columns: On Parcel Number Above; Amount owing per Sched. 4; Nature of Encumbrance And To Whom Payable; Int. Rate; Due Date; How Payable; Are Int. \* and Prin. Current?

\*If any payments of principal or interest are delinquent, please give details \_\_\_\_\_

Has foreclosure been instituted? \_\_\_\_\_ Details \_\_\_\_\_

SCHEDULE 6 - INVESTMENTS IN AND ACCOUNTS WITH AFFILIATED CONCERNS

Table with 7 columns: Name of Affiliate; Investments (Com. or Pfd., No. of Sh., % Owned, Value on Books); Intercompany Accounts (Free to Corp., Owning by Corp.)



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**SCHEDULE 7 - PRINCIPAL SUPPLIERS** (Please list concerns from which you buy large quantities and approximate amount due them on statement date)

Name and City	Amount Owed	Name and City	Amount Owed
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

GENERAL REMARKS - Please explain here or in a supplementary letter any important differences between carrying values and actual values, any unusual receivables or payables of importance, or any other factors which have a bearing on interpretation of your financial statement.

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I certify that the above information provided by me is true, complete, and correct to the best of my knowledge and belief.

\_\_\_\_\_ Date

\_\_\_\_\_ Print Name (Officer/Owner on file with AzDFI)

\_\_\_\_\_ Signature (Officer/Owner on file with AzDFI)

\_\_\_\_\_ Telephone

\_\_\_\_\_ Fax

\_\_\_\_\_ Email