New Commercial Capital, Inc. 3530 Wilshire Blvd., Suite 380, Los Angeles, CA 90010 Tel: 213. 351. 0707 / Fax: 213. 365. 4936

## PERSONAL FINANCIAL STATEMENT

PERSONAL INFORMATION								
NAME IN FULL	DRIVER'S LICENSE NO.		DATE OF BIRTH	SOCIAL SECURITY NO.		PHONE NO.		
SPOUSES NAME	DRIVER'S LICENSE NO.		DATE OF BIRTH	SOCIAL SECURITY NO.		PHONE NO.		
CURRENT ADDRESS (NUMBER, STREET, CITY, STATE, ZIP	CODE)					HOW LONG?		
EMPLOYER (NAME & ADDRESS)					PHONE NO.		HOW LON	IG?
SPOUSE'S EMPLOYER (NAME & ADDRESS)					PHONE NO.		HOW LON	IG?
FINANCIAL INFORMATION								
ASSETS	DOLLARS	CENTS		LIABILITIES		DOLL	ARS	CENTS
CASH			NOTE PAYABL	E				
BANK (CHECKING)			BANK –					
BANK (SAVINGS)			OTHER NOTES		DF BANK TS PAYABLE			
			REAL ESTATE IND	EBTNESS (SCH	EDULE A)			
REAL ESTATE (SCHEDULE A)			TAXES PAYABLE					
NOTE RECEIVABLE	-							
CASH SURRENDER VALUE OF LIFE INSURANCE			OTHER LIABILITIES					
STOCKS & BONDS (SCHEDULE B)			AUTO LOAN BALANCE					
AUTOMOBILEYEAR & MAKE	-		CREDIT CARD PAYABLE					
OTHER								
	_							•
	-							
TOTAL ASSETS			NET WORTH					
ANNUAL INCOME		1	ANNUAL	. EXPEN	DITURES	'		1
SALARY			ESTIMATED LIVING	EXPENSES				
SECURITIES INCOME			REAL ESTATE PAYMENT(S)					
BUSINESS OF PROFESSIONAL INCOME			INCOME TAXES (FEDERAL & STATE)					
		1						1
OTHER INCOME	-		OTHER EXPENSES					
	-							
TOTAL INCOME			тота		URES			
1								

Are there any suits, Judgments, exec	utions of attachments against you pending?	If so, give details:	
Have you ever gone through bankrup	tcy or compromised a debt?	Are any of the assets shown on this form held in Trust?	
If so, give details (use separate sheet	t if necessary)		
Are you a guarantor on anyone?	If so, give details:		
Have you made a will?	Who is the executor/executrix?		

SCHEDULE A: REAL ESTATE OWNED							
ADDRESS & TYPE OF PROPERTY	TITLE IN NAME OF	MONTHLY INCOME	COST	PRESENT MARKET VALUE	BALANCE OWED		
			PURCHASED DATE	MARKET VALUE			
	-						
	-						
	-						
			TOTAL				

SCHEDULE B: LISTED & UNLISTED STOCKS & BONDS OWNED						
NUMBER OF SHARES AMOUNT OF BONDS	DESCRIPTION	ISSUED IN NAME OF	JOINT TENANCY (JT) TENANCY IN COMMON (TIC) COMMUNITY PROPERTY (CP)	MARKET VALUE		

	FACE AMOUNT	CASH SURRENDER VALUE	COMPANY	BENEFICIARY
LIFE INSURANCE				

This financial statement is furnished in connection with an application for credit and is to be regarded as continuous until another shall be substituted for it. If the undersigned, or any endorser or the obligations of the undersigned, at any time becomes insolvent, or commits an act of bankruptcy, or dies, or if any writ of attachment, garnishment, execution or other legal process be issued against property of the undersigned, or if any assessment of taxes against the undersigned, other than on real property, is made by the Federal or State government or any department thereof, or if any of the representations made above prove to be untrue, or if the undersigned fails to notify New Commercial Capita, Inc. (NCC) of any material change in financial condition as given above, then and in either such case, all of the obligations of the undersigned to or held by NCC, either as borrower or guarantor, shall immediately become due and payable, without demand or notice. In consideration of the granting or renewing of any credit to the undersigned hereafter, the undersigned hereafter, the undersigned to NCC.

I hereby certify that I have carefully read the above personal financial statement and it is a complete, true and correct financial statement to be best of my knowledge and belief.

APPLICANT'S SIGNATURE

CO APPLICANT'S SIGNATURE

DATE

Co-Applicant sign above if this is to be a joint account. If not joint application, Spouse sign below the authorize verification of income and credit history. To the best of my knowledge the above information is complete and correct.