

# Personal Financial Statement

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goldleafsurety.com

|  | Α                 | PPLICANT INF | ORMATION           |                      |                   |        |
|--|-------------------|--------------|--------------------|----------------------|-------------------|--------|
| Please use your legal name:  |                   |              |                    |                      |                   |        |
| First  | Middle            |              | Last               |                      |                   |        |
| Date of Birth  | SSN               |              | Drivers License #  |                      |                   |        |
| Home Address   |                   | City         | S                  | tate                 | Zip               |        |
| Length (years at this address  | )                 |              |                    |                      |                   |        |
| Former Address   |                   | City         | S                  | tate                 | Zip               |        |
| Length (years at this address  | )                 |              |                    |                      |                   |        |
| Home Phone   | Work Ph           | one          | Cell               |                      |                   |        |
| E-Mail Address   |                   |              |                    |                      |                   |        |
| Present Employer   |                   |              | Position           |                      |                   |        |
| Employer Address   |                   | City         | S                  | tate                 | Zip               |        |
| Length (years with this emplo  | yer)              |              |                    |                      |                   |        |
| ERY, VERY RARE. WITHOUT TO<br>BUSINESS APPLICATION FOR ST<br>Please use your spouse's legal na | SURETY CREDIT MAY |              | FORM AND HIS/HER A | GREEMEN <sup>*</sup> | T TO CO-INDEMNIFY | , YOUR |
| First  |                   |              | Last               |                      |                   |        |
| Date of Birth  |                   |              |                    |                      |                   |        |
| Home Address   |                   |              |                    |                      |                   |        |
| Length (years at this address  | )                 |              |                    |                      |                   |        |
| Former Address   |                   | City         | s                  | tate                 | Zip               |        |
| Length (years at this address  | )                 |              |                    |                      |                   |        |
| Home Phone   | Work Ph           | one          | Cell               |                      |                   |        |
| E-Mail Address   |                   |              |                    |                      |                   |        |
| Present Employer   |                   |              | Position           |                      |                   |        |
| Employer Address   |                   | City         | S                  | tate                 | Zip               |        |
| Length (years with this emplo  | yer)              |              |                    |                      |                   |        |

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### NOTE: THE DATE OF THESE VALUATIONS SHOULD BE THE SAME AS YOUR COMPANY'S FISCAL YEAR END.

- Please round all amounts to the nearest \$100
- · Please attach additional information, if needed

| DATE OF THIS VALUATION |  |
|------------------------|--|
| DATE OF THIS VALUATION |  |

| ASSETS   |        | LIABILITIES   |        |
|--|--------|---|--------|
|  | AMOUNT |   | AMOUNT |
| Cash on Hand   |        | Notes Payable Banks (Schedule 7)  |        |
| Cash in Following Banks (Name)                                 |        | Notes Payable Others (Schedule 7)   |        |
|  |        | Other Installment Contracts Payable (Schedule 7)                                  |        |
|  |        | Due Dept. Stores, Credit Cards & Others   |        |
| Retirement Accounts  |        |   |        |
|  |        | Income Taxes Payable  |        |
| Owed to You by Friends, Relatives & Others (Schedule 1)        |        |   |        |
|  |        | Other Taxes Payable   |        |
| Owed to You on Contracts for Deed or<br>Mortgages (Schedule 2) |        |   |        |
| Securities Owned (Schedule 3)                                  |        |   |        |
| Cash Surrender Value of Life Insurance (Schedule 4)            |        | Loans Against Your Life Insurance<br>(Schedule 4)                                 |        |
| Homestead & Personal Real Estate<br>(Schedule 5)               |        | Mortgages / Liens on Homestead<br>& Personal Real Estate Holdings<br>(Schedule 5) |        |
| Other Real Estate Holdings (Schedule 6)                        |        | Mortgages Liens on Other Real Estate<br>Holdings (Schedule 6)                     |        |
| Automobiles  |        |   |        |
|  |        | Other Liabilities (Detail)  |        |
| Personal Property  |        |   |        |
| Other Assets (Detail)  |        |   |        |
| TOTAL ASSETS   |        | TOTAL LIABILITIES   |        |

### YOUR PERSONAL NET WORTH (TOTAL ASSETS LESS TOTAL LIABILITIES): \$ \_\_\_\_\_

| ANNUAL INCOME   |           |              |  |  |  |  |
|---|-----------|--------------|--|--|--|--|
|   | APPLICANT | CO-APPLICANT |  |  |  |  |
| Salary  |           |              |  |  |  |  |
| Commissions   |           |              |  |  |  |  |
| Dividends   |           |              |  |  |  |  |
| Interest  |           |              |  |  |  |  |
| Rentals   |           |              |  |  |  |  |
| Alimony, child support or maintenance (You need not show this unless you wish us to consider it.) |           |              |  |  |  |  |
| Other (Specify)   |           |              |  |  |  |  |
| TOTAL INCOME  |           |              |  |  |  |  |

| CONTINGENT LIABILITIES |        |  |  |  |
|------------------------|--------|--|--|--|
|                        | AMOUNT |  |  |  |
| As Endorser            |        |  |  |  |
| As Guarantor           |        |  |  |  |
| Lawsuits               |        |  |  |  |
| For Taxes              |        |  |  |  |
| Other (Detail)         |        |  |  |  |
|                        |        |  |  |  |
|                        |        |  |  |  |
| Check here if "None" □ |        |  |  |  |
| TOTAL                  |        |  |  |  |

(Please complete schedules on following page.)

#### SCHEDULE 1 – OWED TO YOU BY FRIENDS, RELATIVES & OTHERS

| Name of Debtor | Owed To | Collateral | How Payable | <b>Maturity Date</b> | Unpaid Balance |
|----------------|---------|------------|-------------|----------------------|----------------|
|                |         |            | \$ Per      |                      |                |
|                |         |            | \$ Per      |                      |                |
|                |         |            | \$ Per      |                      |                |
|                |         |            |             | TOTAL                |                |

#### SCHEDULE 2 - OWED TO YOU ON CONTRACTS FOR DEED OR MORTGAGES

| Name of Debtor | Type of Property | 1st or 2nd Lien | Owed To | How Payable | Unpaid Balance |
|----------------|------------------|-----------------|---------|-------------|----------------|
|                |                  |                 |         | \$ Per      |                |
|                |                  |                 |         | \$ Per      |                |
|                |                  |                 |         | TOTAL       |                |

#### SCHEDULE 3 - SECURITIES (STOCKS AND BONDS) OWNED

| # of Shares or<br>Bond Issuer | Description | In Whose Name(s) Registered | Cost | Present<br>Market Value | L-Listed<br>U-Unlisted |
|-------------------------------|-------------|-----------------------------|------|-------------------------|------------------------|
|                               |             |                             |      |                         |                        |
|                               |             |                             |      |                         |                        |
|                               |             |                             |      |                         |                        |
|                               |             |                             |      |                         |                        |
|                               |             | TOTAL                       |      |                         |                        |

#### SCHEDULE 4 – LIFE INSURANCE

| Insured | Insurance Company | Beneficiary | Face Value of Policy | Cash Value | Loans Against |
|---------|-------------------|-------------|----------------------|------------|---------------|
|         |                   |             |                      |            |               |
|         |                   |             |                      |            |               |
|         |                   |             |                      |            |               |
|         |                   | TOTAL       |                      |            |               |

#### SCHEDULE 5 - HOMESTEAD & OTHER PERSONAL REAL ESTATE

| Address/Location                   | Title in Name(s) of | Cost and Year Acquired | Present Market Value | Balance owed on<br>Mortgage(s) |
|------------------------------------|---------------------|------------------------|----------------------|--------------------------------|
| Homestead                          |                     | \$                     |                      |                                |
|                                    |                     | Year                   |                      |                                |
| Second Residence (if any)          |                     | \$                     |                      |                                |
|                                    |                     | Year                   |                      |                                |
| Lake or Vacation Property (if any) |                     | \$                     |                      |                                |
|                                    |                     | Year                   |                      |                                |
|                                    | -                   | TOTAL                  |                      |                                |

#### SCHEDULE 6 - OTHER REAL ESTATE HOLDINGS

| Type of Property<br>Address/Location | Title in Name(s) of | Monthly Income (if any) | Cost<br>and Year<br>Acquired | Present Market Value | Balance owed on<br>Mortgage(s) |
|--------------------------------------|---------------------|-------------------------|------------------------------|----------------------|--------------------------------|
| #1                                   |                     |                         | \$                           |                      |                                |
|                                      |                     |                         | Year                         |                      |                                |
| #2                                   |                     |                         | \$                           |                      |                                |
|                                      |                     |                         | Year                         |                      |                                |
| #3                                   |                     |                         | \$                           |                      |                                |
|                                      |                     |                         | Year                         |                      |                                |
|                                      | ,                   |                         | ΤΟΤΔΙ                        |                      |                                |

#### SCHEDULE 7 - NOTES PAYABLE TO BANKS & OTHERS AND OTHER INSTALLMENT CONTRACTS PAYABLE

| To Whom Payable | Address | Collateral or Unsecured | How Payable | Unpaid Balance |
|-----------------|---------|-------------------------|-------------|----------------|
|                 |         |                         | \$<br>Per   |                |
|                 |         | TOTAL                   | \$<br>Per   |                |

#### **ADDITIONAL DISCLOSURES**

|  |   | <u>Applicant</u>   | <u>Spouse</u>  |
|--|---|--|--|
| 1. Has any enterprise owned  | or managed by you failed in business?   | Yes □ No   | ☐ Yes ☐ No   |
| 2. Has any surety company e  | ver paid a claim on a bond for a company you owned  | or managed? ☐ Yes ☐ No   | □ Yes □ No   |
| 3. Have you ever gone throu  | gh bankruptcy?  | Yes 🖬 No   | ☐ Yes ☐ No   |
| 4. Are any assets pledged or   | debts secured, except as shown?   | Yes □ No   | ☐ Yes ☐ No   |
| 5. Have you made a will?   |   | Yes □ No   | ☐ Yes ☐ No   |
| 6. Number of dependents (If "None," check None)                                    |   | 🔲 None   | None   |
| 7. What is your marital status   | a ☐ Married ☐ Separated ☐ Unmarried (unmarried  | d includes single, divorced, widov   | /ed)   |
| If answered yes to question  | I, 2, or 3, please provide explanation:   |  |  |
| DI EAOE  | DDOWDE THE NAME AND CONTACT INFORMAT  | TION FOR YOUR REPRONAL BY  | ANIZED.  |
| PLEASE   | PROVIDE THE NAME AND CONTACT INFORMAT   | ION FOR YOUR PERSONAL BA   | ANKER:   |
| Officer's Name   | Bank Name   |  |  |
| Phone  | Fax   |  |  |
|  | CERTIFICATION AND AUTHO   | DRIZATION  |  |
| 16   |   |  | Uf O O :   |
| LLC, was carefully review  | of the personal and related personal financial inform<br>wed before submission and is true and correct in every<br>s of obtaining surety credit for a company in which I/w  | detail. I/we acknowledge that this   |  |
| hereby are authorized to<br>not limited to, reports or<br>agents and professionals | urety companies to which Goldleaf may submit application or all information submit application of all information submit my/our credit and employment history and such of as they may deem necessary or useful. The Authorized release this information to third parties where they pany. | ubmitted by me/us on an ongoing<br>oral and written references from or<br>zed Parties also are authorized to | basis, including, but<br>customers, suppliers,<br>use and retain all the |
|  | d any copy hereof further authorizes the Authorized attached Privacy Policy and Summary of Your Rights  |  |  |
|  | <u>Applicant</u>  |  |  |
| Date   | Please Sign Here <u>x</u>   |  | _  |
|  | Applicant's Spouse  |  |  |
| Date   | Please Sign Here X  |  |  |
|  |   |  | _  |

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# THE PRIVACY POLICY OF GOLDLEAF FINANCIAL, LTD.

The following is a statement of the Privacy Policy that we have implemented with all of our companies. The nature of our business (helping individuals and businesses obtain the surety bonds they need) requires us to gather personal, financial and business information about you. We deeply respect your privacy, and we appreciate the confidence you place in us each time you provide us with information or permit us to obtain information about you from other sources.

- The Information We Collect. Since surety is a form of credit, the information we collect usually includes information regarding your financial condition and your credit history. It also may include references regarding personal characteristics, contractual relationships, banking relationships and your performance of and exposure to risks similar to the risk(s) to be bonded.
- Where It Comes From. Most of the information we collect comes directly from you or is obtained with the assistance of data provided by you. This information may come from standard forms that you complete and return to us, or it may come from third parties. Some of the information we obtain is private information, and some of it is publicly available.
- Identity of the Third Parties from Whom We Obtain Information. The third parties from whom we obtain information may include other agents we understand to be working for you, accountants and other professionals we understand to be working for you, surety companies that have written bonds for you in the past, consumer credit reporting agencies, business information reporting agencies, persons or entities that employ you (or for whom you perform services), and other business, banking and credit references that you may identify for us. The third parties also may include persons or entities willing to provide credit assistance on your behalf. If you are a company, we also may obtain information about you from your owners.
- Additional Information We May Collect. Once you have obtained a surety bond with our assistance, we may collect additional information about you
  through your transactions with us. This information may include bond numbers for any bonds issued with our assistance, information regarding collateral
  you may provide as security to us or the surety company, ongoing facts and information relating to the bonded risks, claims brought or threatened against
  you, and a variety of facts and information relating to the release, expiration, cancellation, release and/or renewal of any bonds.
- How We Disclose the Information We Collect to Provide Products and Services. We generally disclose information we collect only to surety companies we consider appropriate to your request(s) for surety credit. On occasion, we also may disclose the information to agents, accountants, bankers and other professionals we understand to be working on your behalf. These disclosures occur by telephone, facsimile transmission, e-mail, U.S. Mail and/or standard courier services.
- The Purpose of These Disclosures. The main purpose we have in disclosing information we collect about you is to help you obtain the surety bonds you need or establish the terms and conditions upon which surety credit can be extended to you. Other purposes may include updating your files from time to time, investigating risks that have been bonded for you (and/or claims that are threatened or have been brought against you), investigating or assisting in situations that may affect your surety credit, and determining and collecting premiums, commissions and other charges that may be due from you.
- Your Authorization of the Foregoing Disclosures. All of these disclosures are authorized by your signature on the Questionnaire, the Personal Financial Statement and/or other signed authorizations you provide to us.
- How We Protect the Information We Collect. Our company has adopted physical and procedural safeguards to protect the information we collect, and we regularly remind our employees to respect and maintain those safeguards and rigorously enforce our Privacy Policy. Employees who violate our Privacy Policy (and/or any related procedures) are subject to disciplinary action. With respect to third parties to whom we disclose collected information, federal law requires all of these parties to have and enforce written privacy policies regarding the information we provide to them, and we expect all of them to strictly maintain and enforce their policies. We will consider immediately terminating our contractual relationship with any third party that does not have and actively enforce a written privacy policy that is as strict or stricter than our own.
- We Do Not Disclose or Sell Information for Any Purpose Unrelated to Your Bonding. We do not sell or disclose information we collect to any "non-affiliated" parties, whether for marketing or other purposes. We also do not disclose information about you to persons or entities other than those described above, unless you specifically authorize us to do so.
- We Protect Information We Have Collected About Former Customers. We do not disclose information collected from or about former customers, except as required or permitted by law.
- Your Rights. You have specific rights to see, correct, amend and/or delete personal information we may collect about you. Please see the attached Summary of Your Rights Under the Fair Credit Reporting Act. State law may provide you with additional rights, and we will comply with the law of your state in every case.

## A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

The federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness, and privacy of information in the files of every "consumer reporting agency" (CRA). Most CRAs are credit bureaus that gather and sell information about you – such as if you pay your bills on time or if you have filed bankruptcy - to creditors, employers, landlords, and other businesses. You can find the complete text of the FCRA, 15 U.S.C. 1681-1681u, at the Federal Trade Commission's web site (http://www.ftc.gov). The FCRA gives you specific rights, as outlined below. You may have additional rights under state law, and you may contact your state or local consumer protection agency or state attorney general to learn those rights.

- You must be told if information in your file has been used against you. Anyone who uses information from a CRA to take action against you such as denying an application for credit, insurance, or employment must tell you and give you the name, address, and phone number of the CRA that provided the consumer report.
- You can find out what is in your file. At your request, a CRA must give you the information in your file and a list of everyone who has requested it recently. There is no charge for the report if a person has taken action against you because of information supplied by the CRA, if you request a report within 60 days of receiving notice of the action. You also are entitled to one free report every twelve months upon request if you certify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.
- You can dispute inaccurate information with the CRA. If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report its findings to the CRA. (The source also must advise national CRA's to which it has provided the data of any error.) The CRA must give you a written report of the investigation and a copy of your report if the investigation results in any change. If the CRA's investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.
- Inaccurate information must be corrected or deleted. A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after you dispute it. However, the CRA is not required to remove accurate data from your file unless it is outdated (as described below) or cannot be verified. If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address, and phone number of the information source.
- You can dispute inaccurate items with the source of the information. If you tell anyone such as a creditor who reports to a CRA that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you've notified the source of the error in writing, it may not continue to report the information if it is, in fact, an error.
- Outdated information may not be reported. In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcies.
- Access to your file is limited. A CRA may provide information about you only to people with a need recognized by the FCRA usually to consider an application with a creditor, insurer, employer, landlord, or other business.
- Your consent is required for reports that are provided to employers, or reports that contain medical information. A CRA may not give out information about you to your employer or prospective employer without your written consent. A CRA may not report medical information about you to creditors, insurers, or employers without your permission.
- You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers. Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll -free phone number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the list for two years. If you request, complete, and return the CRA form provided for this purpose, you must be taken off the list indefinitely.
- You may seek damages from violators. If a CRA, a user and/or (in some cases) a provider of CRA data violates the FCRA, you may be entitled to sue them in a federal court.