



CONFIDENTIAL FINANCIAL STATEMENT

Name: _____ Spouse: _____

Home Phone: _____ Cell Phone: _____

Street Address: _____ City: _____ State: ___ Zip Code: _____

Assets

Cash on Hand and in Banks	\$ _____
U.S. Government Securities	\$ _____
Accounts, Loans and Notes Receivable	\$ _____
Cash Surrender Value Life Insurance	\$ _____
Value of Businesses Owned	\$ _____
Other Stocks and Bonds	\$ _____
Real Estate	\$ _____
Automobiles – Number ()	\$ _____
Household Furnishings and Personal Effects	\$ _____
Other Assets (itemize)	\$ _____
Total Assets:	\$ _____

Liabilities and Net Worth

Notes Payable	\$ _____
Liens on Real Estate	\$ _____
Other Liabilities (itemize)	\$ _____
Total Liabilities:	\$ _____

Net Worth: \$ _____

Source of Income

Salary	\$ _____
Spouse	\$ _____
Dividends and Interest	\$ _____
Bonus and Commissions	\$ _____
Total Income:	\$ _____

The Undersigned certifies that this information was provided by him/her and is true and correct. Furthermore, I authorize Bankers Advocate Group LLC and its assignees to investigate my credit and background.

Date: _____ SSN/TIN: _____ Signature(s): _____

Please mail or fax this form to the following address:

PO Box 9228 ● Jupiter, FL 33468
 (561) 882-1331 ● (561) 882-1334 Facsimile
 Chris@BankersAdvocate.com ● www.BankersAdvocate.com