

Hurley Fund Application Personal Financial Statement

All amounts are rounded to the nearest \$100.

APPLICANT INFORMATION						
Full Name						
Street Address						
City/State/Zip						
Country						
Since month	year					
Own	Rent		Other, please describe			
	🗆 Yes					
Payment \$/month	Payment \$	/month				
Previous Address (if less than 5 years	at present address)	·			
City/State/Zip						
Since month	year					
Own	Rent		Other, please describe			
	🗆 Yes					
Payment \$/month	Payment \$	/month				
Social Security #	•	Date of Birth	//			
Mobile Phone ()						

ASSETS	LIABILITIES		
Cash (Schedule 1)	Short Term Notes Due Financial Institutions (Schedule 5)		
Securities (Schedule 2)	Short Term Notes Due to Others (Schedule 5)		
Life Insurance Cash Value (Schedule 3)	Credit Accounts and Bills Due (schedule 6)		
Retirement Accounts, include IRA Accts. (Schedule 1)	Insurance Loans (Schedule 3)		
	Installment Loans and Contracts (Schedule 5)		
	Taxes		
Automobile (Describe)	Other Liabilities (Describe)		
Personal Property			
Other Assets (Describe)			
	Total \$		
Total \$	(Total Assets Less Total Liabilities) Net Worth \$		

Please contact us if you need assistance with completing these schedules. Round all amounts to the nearest \$100.

*ANNUAL INCOME	APPLICANT	PLEASE ANSWER EACH	YES/NO
Salary		Are you a Co-Maker, Endorser or Guarantor of any other person's	
Bonuses/Commissions		debt?	
Dividends/Interest		Are you a defendant in any suit or	
Net Real Estate Income		legal action?	
		Have you ever gone through bankruptcy or had a judgement	
Other (List)		against you?	
Total \$		Have you made a will?	

SCHEDULE 1 / CASH, SAVINGS, CERTIFICATESAND IRA ACCOUNTS

Name of Bank or Financial	Type of Account	Acct. Balance
		Total \$

SCHEDULE 2 / SECURITIES OWNED

Par Value or No. of Shares	Description	Registered in Name(s) of	Listed or Unlisted	Current Market Value	
	Total \$				

SCHEDULE 3 / LIFE INSURANCE

Insurance Company	Insured	Beneficiary	Face Value of Policy	Cash Value of Policy	Loans
Total \$					

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SCHEDULE 4 / OTHER ASSETS

Property Description	Name of Creditor	Year Acquired	Purchase Price	Mortgage Balance	Date of Maturity	Repayment Terms	Current Market Value
						per	
						per	
						per	
						per	
						per	
						per	
Insurance Co.:			Agent:			Total \$	

SCHEDULE 5 / INSTALLMENTS, CREDIT LINES AND NOTES

Name of Creditor	Collateral	Date of Maturity	Repayment Terms	Balance Due
			per	
			Total \$	

SCHEDULE 6 / CREDIT ACCOUNTS, BILLS DUE, ALIMONY/CHILD SUPPORT, DAYCARE, ETC.

Name of Company	Repayment Terms	Balance Due
	per	
	Total \$	

You certify that the information provided in this statement is true and correct. So long as you owe any sums to the bank, you agree to give the bank prompt written notice of any material change in your financial condition and, upon request, you agree to provide the bank with an updated personal financial statement. The bank is authorized to retain this personal financial statement whether or not credit is approved and is further authorized to verify your credit and employment history or any other information in this statement. This application does not obligate the bank to make any loan even if you meet the normal standards the bank considers in determining whether to approve or deny the application.

Signature: _____

Date: _____

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