SURETY SPECIALTY GROUP, INC.
PO BOX 600962
JACKSONVILLE, FL 32260
PH: 904-230-1324 FAX: 904-230-0921

Bond No. _____

PERSONAL FINANCIAL STATEMENT

_____
(Name of Individual)

Give full address _____

Statement of Assets and Liabilities as of _____

If a Corporation: Are you a Sub Chapter "S" Corporation? ☐ Yes ☐ No

CURRENT ASSETS		CURRENT LIABILITIES	
Cash on hand (NOT in bank)	$ _____	Notes Payable, Bank .... ($_____ Monthly)	Total ▸ $ _____
Cash in following banks (Give address)	_____	Notes Payable, Bank .... ($_____ Monthly)	Total ▸ _____
.....	_____	Notes Payable, Other:	
.....	_____	..... ($_____ Monthly)	Total ▸ _____
.....	_____	..... ($_____ Monthly)	Total ▸ _____
Accounts Receivable	_____	..... ($_____ Monthly)	Total ▸ _____
.....	_____	Accounts Payable	_____
Stocks, Bonds and other securities listed		Accruals.....	_____
In Schedules "A".....	_____	Taxes	_____
Merchandise or materials in stock.....	_____	Other Current Liabilities:	_____
Of what does this Merchandise consist?		.....	_____
.....	_____	.....	_____
Notes Receivable	_____	.....	_____
Other current assets:			
Cash Value Life Ins. (**not** face value)	_____	**Total Current Liabilities:**	$ _____
.....	_____		
.....	_____	DEFERRED LIABILITIES	
		Equipment Encumbrance ($____ Monthly)	Total ▸ _____
Total Quick Assets	$ _____	Schedule "B".....	_____
		Mortgages on Real Estate ($___ Monthly)	Total ▸ _____
		Schedule "C".....	_____
		Other Debts maturing in a year or more.	
		.....	_____
FIXED ASSETS		.....	_____
Equipment (complete schedule "B")	_____	.....	_____
Furniture and Fixtures	_____	.....	_____
Real Estate (complete schedule "C").....	_____		
Homestead.....	_____	**Total Liabilities**	$ _____
Investment.....	_____		
Business.....	_____		
		NET WORTH	
Prepaids.....	_____	Capital Stock	_____
Other Fixed Assets:		Paid in Capital.....	_____
.....	_____	Surplus or Retained Earnings.....	_____
.....	_____	Sales Volume-Annual $ ..... ____	_____
.....	_____	Net Profit $..... ____	_____
Long Term Receivables			
.....	_____		
Total Fixed Assets	$ _____	**Total Net Worth**.....	$ _____
Total of all Assets.....	$ _____	**Total of All Liabilities & Net Worth**.....	$ _____

COMPLETE APPLICABLE SCHEDULES ON REVERSE SIDE

SCHEDULE "A" STOCKS AND BONDS

Description	Par Value	Market or Forced Sale Value	Pledged to Secure
.....	$	$	$
.....			
.....			
.....			
.....			
.....			
.....			
.....			
Total.....	$	$	$

SCHEDULE "B" EQUIPMENT

Description	Age	Purchase Price	Depreciation	Book Value	Encumbrance	Amount Payable Monthly
.....		$	$	$	$	$
.....						
.....						
.....						
.....						
.....						
.....						
.....						
Total		$	$	$	$	$

SCHEDULE "C" REAL ESTATE

Location and Description of Property	In Whose Name Is Title?	Mortgagee	Present Forced Sale Value	Amount of Mortgage
.....			$	$
.....				
.....				
.....				
.....				
.....				
.....				
.....				
.....				
.....		Total	$	$

The maker of the foregoing statement hereby authorize the surety to confirm bank balances claimed and all other items comprising said statement. Additionally, I authorize the ordering of any personal or corporate credit reports necessary for the underwriting and consideration of any surety bonds.

The undersigned hereby certifies that each statement hereinbefore contained is true and that this statement is made for the purpose of inducing a surety to execute certain bonds or undertakings.

Dated _____

Note: To be signed:

(a) If a firm, by all partners.
(b) If a corporation, by two of the principal officers.
(c) If individual by principal and spouse.

X _____ (L.S.)
PRINT NAME: SS#

X _____ (L.S.)
PRINT NAME: SS#

_____ (L.S.)

_____ (L.S.)