

**INDIVIDUAL INFORMATION & PERSONAL FINANCIAL STATEMENT**

Each individual with 20% or greater interest in the borrowing entity, complete this form and a Schedule of Real Estate Owned, if applicable.

**I. INDIVIDUAL INFORMATION**

Name _____	Spouse _____		
SSN _____	SSN _____		
Phone _____	Phone _____		
Email _____	Email _____		
Street Address _____			
City, State and Zip Code _____			
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Not Married			
Co-Borrower <input type="checkbox"/>	General Partner <input type="checkbox"/>	Guarantor <input type="checkbox"/>	Individual(s) <input type="checkbox"/>
Managing <input type="checkbox"/>	Member <input type="checkbox"/>	Member Trust <input type="checkbox"/>	President <input type="checkbox"/>
Shareholder <input type="checkbox"/>	Trustee <input type="checkbox"/>	Other _____	
Years as Business Owner/Investor _____		% of Borrowing Entity Owned _____	

**II. PERSONAL FINANCIAL STATEMENT**
**ASSETS (ROUNDED TO NEAREST DOLLAR)**

Cash on Hand and in Bank(s)	\$ _____
Savings Account(s)	\$ _____
IRA/Other Retirement Account(s)	\$ _____
Account(s) & Note(s) Receivable	\$ _____
Life Insurance (cash Surrender Value Only)	\$ _____
Stocks and Bonds	\$ _____
Personal Residence	\$ _____
Investment Real Estate (attach schedule)	\$ _____
Personal Property	\$ _____
Other Asset _____	\$ _____
<b>TOTAL ASSETS</b>	<b>\$ _____</b>

**LIABILITIES (ROUNDED TO NEAREST DOLLAR)**

Unsecured Notes Payable (Bank & Other)	\$ _____
Credit Card Balance(s)	\$ _____
Installment Loan(s)	\$ _____
Loan on Life Insurance	\$ _____
Mortgage(s) on Residence	\$ _____
Mortgage(s) on Investment RE	\$ _____
Other Liability _____	\$ _____
Other Liability _____	\$ _____
Other Liability _____	\$ _____
<b>TOTAL LIABILITIES</b>	<b>\$ _____</b>
<b>NET WORTH (ASSETS LESS LIABILITIES)</b>	<b>\$ _____</b>

**III. MONTHLY INCOME AND EXPENSE INFORMATION**

GROSS MONTHLY INCOME	Individual	Spouse	Combined
A. Base Salary	\$ _____	\$ _____	\$ _____
B. Commission/Bonus	\$ _____	\$ _____	\$ _____
C. Dividends/Interest	\$ _____	\$ _____	\$ _____
D. Net Rental Income	\$ _____	\$ _____	\$ _____
E. Other Income*	\$ _____	\$ _____	\$ _____
<b>TOTALS</b>	<b>\$ _____</b>	<b>\$ _____</b>	<b>\$ _____</b>

\*Describe Other Income \_\_\_\_\_

\*\*Describe Other Debt \_\_\_\_\_

**MONTHLY EXPENSES**

A. Rent	\$ _____
B. First Mortgage P&I	\$ _____
C. Other Financing (P&I)	\$ _____
D. Hazard Insurance	\$ _____
E. Real Estate Taxes	\$ _____
F. Installment Loans	\$ _____
G. Credit Card Debt	\$ _____
H. Other Debt*	\$ _____

**IV. PERSONAL DECLARATIONS**

If the answer to any question A through F is YES, please provide a separate sheet with an explanation.

	INDIVIDUAL		SPOUSE	
	YES	NO	YES	NO
A. Are there any outstanding judgments against you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Have you declared bankruptcy within the last ten years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Have you had property foreclosed upon or given a deed-in-lieu thereof in the last ten years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Are you a party to a lawsuit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Have you directly or indirectly been obligated on any loan that resulted in foreclosure or transfer of title in lieu of foreclosure or judgment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation bond, or loan guarantee?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. Are you obligated to pay alimony, child support, or separate maintenance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. Are you a member of the armed forces or armed forces reserves?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. Are you a U.S. Citizen?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J. Are you a permanent resident alien?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K. Are any of your assets held in a trust? If YES, provide the name of the trust:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
L. Are you a guarantor or co-signer for obligations not listed on this financial statement? If YES, provide the amount of the contingent liability:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		\$ _____		\$ _____

**V. AUTHORIZATION AND SIGNATURES**

I/We, the undersigned, hereby authorize Evolution Funding or its designee (and any assignee or potential assignee) to make inquiries and obtain a credit report as necessary to verify the accuracy of the information and statements made to Evolution Funding and to determine my creditworthiness. I/We certify the statements and information contained in all documentation provided are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I understand false or misleading statements may result in forfeiture of benefits and possible felony prosecution by the U.S. Attorney General (reference 18 U.S.C. § 1001). I/We acknowledge receipt of the "IMPORTANT DISCLOSURES" page of this application.

 \_\_\_\_\_  
 Authorized Signature

 \_\_\_\_\_  
 Date

 \_\_\_\_\_  
 Authorized Signature

 \_\_\_\_\_  
 Date