



Company Financial Statement

Name of Licensee/Applicant:_____ _____ City_____ Address_

 State______Zip____Telephone (____)

Financial conditions at close of business on ____/ / ___(mm/dd/yyyy)

ASSETS			LIABILITIES	LIABILITIES			
Cash on Hand and in Bank		\$	Accounts Payable - Not Due	\$			
Accounts Rec. Customers - Current	\$		Accounts Payable - Past Due	\$			
Accounts Rec. Customers - Past Due	ccounts Rec. Customers - Past Due \$		Notes Payable	\$			
Total Accounts Receivable	\$		Notes Payable Other Banks	\$			
Less: Reserve Doubtful Accts	\$	\$	Notes or Trade Acceptances Payable for Mdse.	\$			
Notes Receivable - Customers	\$		Other Notes Payable	\$			
Less: Reserve Doubtful Notes	\$	\$	Portion of Equipment Contracts and Chattel	\$			
Trade Acceptances Receivable		\$	Mortgages Due Within One Year	\$			
Merchandise - Finished		\$	Due Officers and Stockholders	\$			
Merchandise - Raw Materials		\$	Due Controlled or Affiliated	\$			
Readily Marketable Securities (Sched 3)		\$	Reserve for Income Taxes	\$			
			Other Taxes Payable	\$			
			Accrued Liabilities	\$			
Net Cash Surrender Value of Life Insurance	(Sched 1)	\$	Portion of Long Term Debt Due within One Year	\$			
TOTAL CURREN	T ASSETS		TOTAL CURRENT LIABILITIES				
Real Estate and Bldgs. (Sched 4)	\$		Real Estate Encumbrances (Sched 5)	\$			
Less: Reserve for Depreciati	\$	\$					
Machinery-Equipment-Fixtur	\$		Non-Current Portion of Equipment Contracts				
Less: Reserve for Depreciati	\$		and Chattel Mortgages	\$			
Automobiles and Trucks	\$						
Less: Reserve for Depreciation	\$	\$	Other Non-Current Debt (describe):	\$			
Investments in Controlled or Affiliated Co.	Sched 6)	\$	TOTAL LIABILITIES	\$			
Other Securities Owned (Sched 3)		\$					
			Other Reserves (describe):				
Due from Controlled or Affiliated Co. (Sche	d 6)	\$		_			
Due from Officers and Stockholders (Sched	2)	\$					
Other Non-Current Receivables		\$	NET WORTH:				
			Preferred Stock	\$			
Deferred and Prepaid Items		\$	Common Stock	\$			
			Capital Surplus	\$			
			Earned Surplus	\$			
			TOTAL NET WORTH	\$			
TOTAL		\$	TOTAL	\$			



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CONTINGENT LIABILITIES (not already included) If	none, so state.	
		Has full provision been made on this statement for all doubtful receivables from customers and are the foregoing valuations on them conservative?
On Acceptances, Contracts or Notes Discounted or Sold	\$	YesNo
As Guarantor or Endorser for	\$	
For Merchandise Consigned by Suppliers	\$	Are any assets pledged or any debts secured except as indicated?
Otherwise (describe)	\$	YesNo If so, please itemize by debt and security.
Are any book account sold or assigned? YesNo		
Amount	\$	
To whom?		
With Recourse? YesNo	_	
COMMITMENTS:		
Approximate Purchase Commitments	\$	
Approximate Unfilled Orders on Hand	\$	Are there any judgments, suits, or any claims for tax deficiencies now
		pending or in prospect against the corporation? Explain
Describe any other unusual commitments		

OPERATING RECORD FROM ____/ ___(mm/dd/yy) TO ____/ (mm/dd/yy):

If profit and loss statement does not fit your business, please attach a statement on your own form.

Net Sales for Period	\$		Reconciliation of Surpl	us:		
Cost of Goods Sold	\$	-	Surplus at beginning of	period		\$
Gross Profit		\$	Net Profit			\$
Selling Expense	\$		*Surplus Credits			\$
Administrative Expense	\$	-	Total			\$
General Expense	\$	_	Dividends Paid		\$	
Total Operating Expense		\$	*Surplus Debits		\$	\$
Operating Profit		\$	Surplus as of this stater	ment date		\$
Other Income		\$				
Total Income		\$	*If Surplus Adjustments	involve important tran	sactions please	e give details below:
Other Deductions	\$					
Federal & State Income Tax	\$	_				
Total Deductions		\$				
Net Profit		\$				
Total Depreciation and Amortization inclu	ded in above state	n \$		MONTHLY SAI	LES	
			Please enter here your ap	proximate sales by mo	nths during the	e past fiscal period:
Deductions for Bad Accounts included in a	above statement	\$	Jan	Feb	М	lar
			Apr	May	J	un
Salaries to Executive Officers included in a	above statement	\$	Jul	Aug	Se	ept
			Oct	Nov	D	lec

Complete the following. Include the supporting schedules.

OTHER BANKS USED:

Name	City	Do you borrow there?	Maximum Debt Past Year
		Yes No	\$
		YesNo	\$
		YesNo	\$
		Yes No	\$





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RENTAL : Does con	mpany rent? Yes	No					
Present monthly renta	l paid \$						
Date of expiration of l	lease/	/					
CORPORATE INFORMATION :	Under laws of what stat	e are you incorporated:	: 				
	Are all franchise taxes of	current?	Yes	No			
	Are you authorized to d	o business in Arizona?	Yes	No			
	Have all other legal requ	uirements been met?	Yes	No			
No. of authorized common shares _		_Outstanding	Par value	6			
Year last div. paid	Annual rate if established \$	No. of	f authorized pfd. shares				
Outstanding	Itstanding Par value \$ Dividend preference \$ Cumulative?						
Div. Pd. to							

Please list any trade styles used by the corporation_

SCHEDULE 1 - INSURANCE							
Fire Insurance:	\$		Liability Inst	urance:		\$	
On Merchandise	\$		Public Liabi	lity on Owned	Autos	\$	
On Mach'y, Equipt. and Fixtures	\$		Property Dat	mage on Own	ed Autos	\$	
On Buildings	\$		P.L. and P.D	. on Non-own	ed Autos	\$	
			Building & I	Elevator Pub.	Liab.	\$	
Check all that are applicable to the co	overage the cor	poration carries:					
Explosion Ins.		Auto Collision			Business Inte	erruption	
Riot and Strike		Auto, Fire, The	ft		Robbery or Burglary		
Steam Boiler		Workmen's Cor	np		Products Lia	bility	
Machinery Breakdown							
Is the extended coverage endorsement a	attached to fire	policies?		Yes	No		
Do any policies contain a coinsurance c	lause?			Yes	No	Basis	_%
Is any insurance on a monthly reporting	basis?			Yes	No		
Are employees having custody or control	ol of property a	adequately bonde	ed?	Yes	No		
Insurance on Lives of Officers, Director	rs or Other Exe	cutives Naming	the Corporati	on as Benefic	ary:		
Name of Insured	Amt. of Policy	y	Cash Value	Amt. of Loan	IS	Net Cash Value	
	\$		\$	\$		\$	
	\$		\$	\$		\$	
	<u>\$</u>		<u>\$</u>	<u>\$</u>		<u>\$</u>	

SCHEDULE 2 - OFFICERS, DIRECTORS AND PRINCIPAL STOCKHOLDERS									
Name	Title	Shares Owned		Shares Owned		Officers and S	Stockholders Accts		
		Preferred	Common	Due to Corp	Due from Corp.				



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SCHEDULE 3 - SECURITIES OWNED Please attach separate schedule if needed.									
Stocks-Shares, Bond-Amounts	Description	Value at Which Carried on Corp.'s Books	Current Mkt. on Listed		Estima	ated Value on	Unlisted		
			(a)	Amount	(a)	Amount	Yearly Div.		

SCHE	SCHEDULE 4 - REAL ESTATE AND BUILDINGS (Please give details of encumbrances on Schedule 5 opposite proper Parcel No.)								
Parcel	Location and Description Include Nature of Improvements	Monthly Income	Title in Name of	Valuation on Corp.'s Books		Amount of Encumbrances	Assessed Valuation		
				Land	Improvements				
No. 1									
No. 2									
No. 3									
No. 4									
No. 5									

Please designate by Parcel No. those properties used in the business_____

Are taxes delinquent on any of your properties? ______ If so, please give amount and details______

	SCHEDULE 5 - REAL ESTATE ENCUMBRANCES											
On Parcel Number Above	Amount owing per Sched. 4	Nature of Encumbrance And To Whom Payable	Int. Rate	Due Date	How Payable	Are Int. * and Prin. Current?						
#1 above												
#2 above												
#3 above												
#4 above												
#5 above												

SCHEDULE 6 - INVESTMENTS IN AND ACCOUNTS WITH AFFILIATED CONCERNS									
Name of Affiliate		Investm	ients		Inte	Intercompany Accounts			
	Com. or Pfd.	No. of Sh.	% Owned	Value on Books	Free to Corp.	Owning by Corp.			



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SCHEDULE 7 - PRINCIPAL SUPPLIERS (Please list concerns from which you buy large quantities and approximate amount due them on statement date)								
Name and City	Amount Owed	Name and City	Amount Owed					
	\$		\$					
	\$		\$					
	\$		\$					
	\$		\$					
	\$		\$					
	\$		\$					

GENERAL REMARKS - Please explain here or in a supplementary letter any important differences between carrying values and actual values, any unusual receivables or payables of importance, or any other factors which have a bearing on interpretation of your financial statement.

I certify that the above information provided by me is true, complete, and correct to the best of my knowledge and belief.

Date

Print Name (Officer/Owner on file with AzDFI)

Signature (Officer/Owner on file with AzDFI)

Telephone

Fax

Email