

CONFIDENTIAL PERSONAL FINANCIAL QUESTIONNAIRE

Name of Proposed Insured _____ Date of Birth _____

Please attach most recently completed financial statement, or complete A. & B. below.

A. Current Personal Net Worth

ASSETS

1. Cash in Savings, Stocks, Bonds,
Life Ins. Net. Cash Values \$ _____
2. Notes & Accounts Receivable \$ _____
3. Net Business Interest \$ _____
4. Real Estate \$ _____
5. Personal Property \$ _____
6. Other Assets (Describe)
_____ \$ _____
_____ \$ _____
7. TOTAL ASSETS \$ _____

LIABILITIES

1. Mortgage or Liens on
Real Estate \$ _____
2. Notes & Accounts Payable \$ _____
3. Unpaid Interest & Taxes \$ _____
4. Other Liabilities (Describe)
_____ \$ _____
_____ \$ _____
5. TOTAL LIABILITIES \$ _____
6. NET WORTH \$ _____

B. Personal Income Statement - For Calendar Year Ending _____

- | | | | |
|---|----------|---------------------|----------|
| 1. Salary | \$ _____ | 5. Bonus | \$ _____ |
| 2. Commissions | \$ _____ | 6. Other (Describe) | _____ |
| 3. Net Income From
Self-Employment | \$ _____ | _____ | \$ _____ |
| 4. Investment Income
(interest, dividends, etc.) | \$ _____ | 7. Total Income | \$ _____ |

C. Any bankruptcies in the past 7 years? Yes No If "Yes," explain:

D. Are any suits pending or unsatisfied judgements against you at this time? Yes No If "Yes," explain:

E. Purpose of Insurance (Check applicable block(s) and follow instructions below)

ESTATE TRANSFER TAXES INCOME REPLACEMENT DEBT REPAYMENT or OTHER

Please explain why the amount of insurance is necessary, including, if applicable, estimated estate transfer taxes, who will suffer a financial loss, how the amount of insurance was determined, and how it is expected that the proceeds will be utilized.

I certify that I have read the above questions and answers and declare that all statements and answers to the above questions are true and complete as recorded.

Date

Witness

Signature of Proposed Insured