



Construction Underwriters, LLC
 5501 Twin Knolls Road, Suite 104
 Columbia MD 21045
 443-470-5055

Personal Financial Statement

Section 1- INDIVIDUAL INFORMATION			Section 2- SPOUSE INFORMATION		
Name			Name		
Resident Address			Resident Address		
City/State/ Zip			City/State/Zip		
Phone	Cell		Phone	Cell	
Email		SSN	Email		SSN
Date of Birth			Date of Birth		
Position/Occupation			Position/Occupation		
Business Name			Business Name		
Business Address			Business Address		
City/State/Zip			City/State/Zip		
Business Phone			Business Phone		

Section 3- STATEMENT OF FINANCIAL CONDITION AS OF _____, 20____			
ASSETS <small>Do not include Assets of doubtful value</small>	In Dollars <small>(Omit Cents)</small>	LIABILITIES	In Dollars <small>(Omit Cents)</small>
Cash on Hand and in Banks		Notes Payable to Banks- secured	
US Gov't & Marketable Securities (Schedule A)		Notes Payable to Banks- unsecured	
Non-Marketable Securities (Schedule B)		Due to Brokers	
Securities held by Broker in margin accts		Accounts Payable to others- secured	
Restricted or Control Stocks		Accounts Payable- unsecured	
Partial interest in Real Estate Equities <small>(Schedule C)</small>		Accounts and bills due	
		Unpaid Income Tax	
Real Estate Owned (Schedule D)		Other Unpaid Taxes and Interest	
Loans Receivable		Real Estate Mortgage Payable (Schedule D)	
Automobiles and other personal property		Other Debts- itemize	
Cash value- life insurance (Schedule E)			
Other Assets- itemize			
		TOTAL LIABILITIES	
		NET WORTH	
TOTAL ASSETS		TOTAL LIABILITIES & NET WORTH	

SCHEDULE D- REAL ESTATE OWNED

Address & Type of Property	Title in Name Of	Date Acquired	Cost	Market Value	Mortgage Maturity	Mortgage Amount

SCHEDULE E- LIFE INSURANCE CARRIED, INCLUDING N.S.L.I. AND GROUP INSURANCE

Name of Insurance Company	Owner of Policy	Beneficiary	Face Amount	Policy Loans	Cash Surrender Value

SCHEDULE F- BANKS OR FINANCE COMPANIES WHERE CREDIT HAS BEEN OBTAINED

Name and Address of Lender	Credit in Name Of	Secured or Unsecured	Original Date	High Credit	Current Balance

If Schedule space does not allow for all necessary information, please attach additional sheets as needed.

The Undersigned hereby represents that the herein statements are true and authorizes any bank or other references to verify the correctness of items in the above statement of Surety. Surety is authorized to investigate, at any time, the Undersigned's credit, employment history, and department of motor vehicle records.

Signature (Individual) _____ Date _____

Signature (Spouse) _____ Date _____