



**SCHEDULE 2: FARM PRODUCTS, FEED AND GRAIN ON HAND**

CROP	QUANTITY (BU, BALE, CWT)	WHERE STORED	PRICE PER UNIT	TOTAL VALUE
				\$
<b>TOTAL</b>				\$

**SCHEDULE 3: LIVESTOCK**

CLASS	BREED	NUMBER OF HEAD	AVERAGE WEIGHT PER HEAD	MARKET VALUE PER HEAD	TOTAL VALUE
<b>TOTAL</b>					\$

**SCHEDULE 4: FARM MACHINERY AND AUTOMOTIVE EQUIPMENT**

DESCRIPTION	MAKE	QUANTITY	PURCHASED		PRESENT VALUE
			DATE	COST	
				\$	\$
<b>TOTAL</b>					\$

**SCHEDULE 5: FARM AND RANCH LANDS**

ACRES	LEGAL DESCRIPTION (show county and state)	NATURE OF IMPROVEMENTS	MARKET VALUE	To Be Completed By Creditor TITLE INFORMATION
<b>TOTAL</b>				\$

**SCHEDULE 6:**

**OTHER REAL ESTATE**

ACRES	LEGAL DESCRIPTION (show county and state)	NATURE OF IMPROVEMENTS	MARKET VALUE	To Be Completed By Creditor TITLE INFORMATION
<b>TOTAL</b>			\$	

**SCHEDULE 7:**

**UNSECURED NOTES PAYABLE TO FINANCIAL INSTITUTIONS**

NAME OF FINANCIAL INSTITUTION	PURPOSE OF LOAN	ORIGINAL AMOUNT	AMOUNT OWED	WHEN DUE	REPAYMENT PLAN
		\$	\$		
<b>TOTAL</b>			\$		

**SCHEDULE 8:**

**LOANS SECURED BY LIVESTOCK**

LENDER	SECURED		AMOUNT OWED	WHEN DUE	REPAYMENT PLAN
	TYPE	NO. OF HEAD			
			\$		
<b>TOTAL</b>			\$		

**SCHEDULE 9:**

**LOANS ON FARM MACHINERY AND AUTOMOTIVE EQUIPMENT**

LENDER	DESCRIPTION	AMOUNT OWED	WHEN DUE	REPAYMENT PLAN
		\$		
<b>TOTAL</b>		\$		

**SCHEDULE 10:**

NAME OF LENDER	PURPOSE OF LOAN	ORIGINAL AMOUNT	AMOUNT OWED	WHEN DUE	REPAYMENT PLAN
		\$	\$		
<b>TOTAL</b>			\$		

**SCHEDULE 11:**

**LIENS ON FARM AND RANCH LANDS**

LENDER	DESCRIPTION AND LOCATION	ORIGINAL AMOUNT	AMOUNT OWED	REPAYMENT PLAN
		\$	\$	
<b>TOTAL</b>			\$	

**SCHEDULE 12:**

**LIENS ON OTHER REAL ESTATE**

LENDER	DESCRIPTION AND LOCATION	ORIGINAL AMOUNT	AMOUNT OWED	REPAYMENT PLAN
		\$	\$	
<b>TOTAL</b>			\$	

**SCHEDULE 13:**

**PROPERTY INSURANCE**

PROPERTY COVERED	INSURANCE COMPANY NAME	PROPERTY NUMBER	AMOUNT
BUILDINGS			\$
GRAIN			
LIVESTOCK			
MACHINE & AUTOMOTIVE EQUIP			
LIABILITY			

**SCHEDULE 14:**

**LIFE INSURANCE (Indicated by Any Policy Loans)**

INSURANCE COMPANY NAME	POLICY NUMBER	FACE AMOUNT	CASH OR LOAN VALUE	BENEFICIARY
	<input type="checkbox"/>	\$	\$	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
<b>TOTAL</b>			\$	

**SUPPLEMENTAL INFORMATION**

<input type="checkbox"/> LEASE	NUMBER OF ACRES	LOCATION (COUNTY AND STATE)	TAXES PAID TO (DATE)	MORTGAGE INTEREST PAID TO (DATE)
<input type="checkbox"/> OWN				
DATE LEASED	TERM OF LEASE	ANNUAL RENTAL	DATE PAID TO	

HAVE YOU ANY CONTINGENT LIABILITIES AS ENDORSER, CO-MAKER, GUARANTOR, LEASES, CONTRACTS, OR LETTERS OF CREDIT?  NO  YES (IF YES, EXPLAIN)  
 (USE SEPARATE SHEET IF MORE SPACE IS NEEDED)

HAVE YOU ANY PARTNERS IN YOUR BUSINESS?  NO  YES (IF YES, STATE PARTICULARS)

HAS AN ACTION IN BANKRUPTCY EVER BEEN FILED FOR OR AGAINST YOU?  NO  YES (IF YES, EXPLAIN) | HAVE YOU ANY JUDGEMENTS OR SUITS PENDING AT THIS TIME?  NO  YES (IF YES, STATE AMOUNT AND EXPLAIN)

Tax Return has been Filed Through \_\_\_\_\_. Any Additional Assessments  No  Yes Amount \_\_\_\_\_

This Financial Statement and supporting schedules are submitted for the purpose of obtaining credit. It is a true, complete and correct representation of undersigned's financial condition as of the date shown. You are authorized by undersigned to check credit, to verify the accuracy of the information contained herein, and to answer questions about your credit experience with undersigned.

DATE

SIGNATURE