PERSONAL FINANCIAL STATEMENT AS OF

SUBMITTED TO:	EASTHAMPTON	SAVINGS BANK	Easthampton MA 01027
SUDMITTED TO.	ENVIIIMI I VII	OMING COMITA	castriampton MA 01027

PERSONAL INFORMATION										
APPLICANT (NAME)					CO-APPLICANT (NAME)					
Employer		gymdygyngiddidgella am gyddidiaes o'i hellol dill ydd ar acendid a benn y dill y dill y dill y dill y dill y d			Employer			une de componente de l'étre de la componente de l'entre de l'entre de l'entre de l'entre de l'entre de l'entre		
Address of Employer	танда менде на дого на дого на предостава на предостава на предостава на предостава на подостава на предостава		ere kilministerin kilonolia dannasia kantikus isterila di kantikus a	Address of Employer	raggiment as - en ma ar construct est estélément un societ de la coma sun Adambient					
Business Phone No.	No. of Years with Employer Title/Position				Business Phone No.	No. of Years with Employer				
Name of previous employer	& position (if with curr	ent employer less	No. of Yrs.	Name of previous employer & position (if with current employer less than 3 yrs.) No. of Yrs.						
Home Address	karandakan di Baragan yang karan	an kau seriak minintaran (mangan) di Angain di Mangain (mangain) di Angain (mangain) di Angain (mangain) di Ang	alkan antinati metakatata atau aari metakata	Home Address						
Home Phone No.	one No. Social Security No. Date of Birth				Home Phone No.	ne No. Social Security No. Date of Birth				
Name, Phone No. of your	Accountant	сканим et (ком о о менеро осучено до от ток и с россий учениций од осучено осучено осучено осучено осучено осу		Name, Phone No. of your Accountant						
Name, Phone No. of your	Attorney	ugus alka kulilini kale ar sudga sata kongo reting nga kulikusu kepada	Name, Phone No. of your Attorney							
Name, Phone No. of your Investment Advisor/Broker					Name, Phone No. of your Investment Advisor/Broker					
Name, Phone No. of your	Insurance Advisor				Name, Phone No. of your	nsurance Advisor				

Cash Income & Expenditures Statement For Year Ended

(Omit cents)

AMOUNT (\$)

\$

asn income & Expenditures Statement	(Umit cents)			
ANNUAL INCOME	AMOUNT (\$)	ANNUAL EXPENDITURES		
Salary (applicant)	\$	Federal Income and Other Taxes		
Salary (co-applicant)		State Income and Other Taxes		
Bonuses & Commissions (applicant)		Rental Payments, Co-op, or Condo Maintenance		
Bonuses & Commissions (co-applicant)		Mortgage Payments Residential Investment		
Rental Income		Property Taxes Residential Investment		
Interest Income		Interest & Principal Payments on Loans		
Dividend Income		Insurance		
Capital Gains		Investments (including tax shelters)		
Partnership Income		Alimony/Child Support		
Other Investment Income		Tuition		
Other Income (List)**		Other Living Expense		
		Medical Expenses		
		Other Expense (List)		
TOTAL INCOME	\$	TOTAL EXPENDITURES >		

Any significant changes expected in the next 12 months?

Yes No (If yes, attach information.)

** Income from alimony, child support, or separate maintenance income need not be revealed if the applicant or co-applicant does not wish to have it considered as a basis for repaying this obligation.

These forms are intended for use in commercial lending transactions. Where any other use is contemplated, it is suggested that a careful review be made to ensure compliance with applicable laws and regulations.

CONTINGENT LIABILITIES Are you a guarantor, co-maker, or endorser for any debt of an individual, corporation, or partnership? Do you have any outstanding letters of credit or surety bonds? Are there any suits or legal actions pending against you? Are you contingently liable on any lease or contract? Are any of your tax obligations past due? What would be your total estimated tax liability if you were to sell your major assets? If yes for any of the above, give details: Schedule A - All Securities (including non-money market mutual funds)	8 8 10 10 10 10 10 10 10 10 10 10 10 10 10	and a second		**************************************	ance Sheet as of
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READILY MARKETABLE SECURITIES (including U.S. Governments and Municipals)*	RRENT PLEDI ET VALUE YES	CURRENT MARKET VALUE	WHERE HELD COST CURRE MARKET V		o. of Shares ock) or Face Description OV
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		kana lainna dinna derikin dekin minemaka Ameringian da Makhambe ekiden Desekakkan menensa.			Therearing over a statistical and management
MAN DEARN Y MARKETARE SECURITIES (Aleady), held thinly lended on sentiated dearly		ter Nice A de sist i verie de de la verie de selecte e es entre a disse sus seu entre del de la licente estadoria.		enterente de la company de	N. DEARLY WARPETADIE PERIODERS (January Land)
NON-READILY MARKETABLE SECURITIES (closely held, thinly traded, or restricted stock)					DE-DEMOLT MARKETABLE SECURITIES (closely held, thinly traded, or restricted stoc

 $^{^{\}star}\,$ If not enough space, attach a separate schedule or brokerage statement and enter totals only.

edule B - Insurance		,				
e Insurance (use additiona	al sheet it necess	ary)				
Insurance Company	Face Amount of Policy	Type of Policy	Beneficiary	Cash Surrender Value	Amount Borrowed	Ownership
And the state of t		Special Section 1	ment na qui un un prime que que protripo pod en ingranda en la prime de la prime del prime del prime de la prime del la prime de la prime del la prime de la prime del la pri			
•• — под при	чения в померене до продости на применения в померене на применения в померене на применения в померене на при		1970 т. ступов Лимон (1988) по во по до ступо по посто на села на сориса морода додо повредава Андроговар	and the restriction of the state and restriction for a few states of the restriction of the states o		
Disability Insuranc	e	Applicant	Co-Applicant			
onthly Distribution if Disabl	led					
imber of Years Covered						

Schedule C - Personal Resi	dence & Real Estate	nvestme	nts, Mort	gage Debt (m	ajority owne	rship	only)		
Personal Residence	Legal	1	hase Price	Market	Present Loan	Inter- est	Loan Maturity	Monthly	
Property Address	Owner	1641	FIICE	Value	Balance	Rate	Date	Payment	Lender
The state of the s					Application of the property of				
					***************************************	1			
Investment		Que	hase		Present	Inter-	Loan		
Property Address	Legal Owner	Year	Price	Market Value	Loan Balance	est Rate	Maturity Date	Monthly Payment	Lender

erakan pulah kedakan elemen muun muun muun pengengan pengengalah kala kelabahan pena pengapan muun bermada baha Pengapan									

Schedule D - Partnerships (less than n	najority ownersh	ip for real estate	partnerships	3)*	iki dikantan kanan menengan yang kebinan sababan di kanan sababan kebina dan banan sababan dan banan sababan d	7.00-1-17-16-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
Type of Investment	Date of Initial Investment	Cost	Percent Owned	Current Market Value	Balance Due on Partnerships: Notes, Cash Call	Final Contribution Date
Business/Professional (Indicate name):						
investments (including Tax Shelters):						
					The second secon	
						·

^{*} **Note:** For investments which represent a material portion of your total assets, please include the relevant financial statements or tax returns, or in the case of partnership investments or S-corporations, schedule K-1s.

Schedule E - Notes Payab	6			***************************************		700 (1900)		
Due to	Type of Facility	Amount of Line	Sec	ured	Callabarat	Interest	0.4 4	Unpaid
00¢ tu	Type of racinty	Automit of File	Yes	No	Collateral	Interest Rate	Maturity	Unpaid Balance
	The construction because the foundation accounts to the description of the confidence of the confidenc	and produces an extension of the contention of t						
The state of the s								

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	Please Answer The Following Questions:	Are any returns currently being audited or contected?					
1.	Income tax returns filed through (date): ### Income tax returns filed through (date): ###################################	1					
0	If yes, what year(s)?						
۷.							
_	If yes, please provide details:						
3.	3. Have you drawn a will? Yes No						
_							
	4. Number of dependents (excluding self) and relationship to applicant:						
	5. Have you ever had a financial plan prepared for you?						
	6. Did you include two years federal and state tax returns? Yes No						
7.		Do (either of) you have a line of credit or unused credit facility at any other institution(s)?					
	If so, please indicate where, how much, and name of banker:						
8.	8. Do you anticipate any substantial inheritances?						
**							
th o co co si th ir to	the guarantee of the undersigned. The undersigned acknowledge and underst or continue credit or to accept a guarantee thereof. Each of the undersigned correct and complete. Each of the undersigned agrees to notify you immedia material adverse change (1) in any of the information contained in this statem of any of the undersigned to perform its (or their) obligations to you. In the considered as a continuing statement and substantially correct. If the under should prove to be inaccurate or incomplete in any material respect, you may the undersigned, as the case may be, immediately due and payable. You are a information contained herein and to determine the credit-worthiness of the unto give you any information it may have on the undersigned. Each of the undersigned. As long as any obligation or guarantee of the undersigned to statement. This personal financial statement and any other financial or other in	ure nt's Signature (if you are requesting					
		l accommodation jointly)					