



Valued customer,

Thank you for your interest in applying for a loan through American National Bank & Trust. We strive to make this process as simple, yet thorough, as possible. We sincerely appreciate the opportunity for your business. If you have any questions, please feel free to reach out to any of our highly motivated and engaged loan officers, or we will be happy to assist you by calling 940-397-2300.

Helpful Hints:

- The schedules on pages 2 - 4 will automatically add its values into the balance sheet on page 1, with a few exceptions. The boxes colored dark blue are independent of this, and will require you to fill in those specific account listings, if necessary. For example, accounts receivable, equipment & other business assets, personal property & automobiles, and other assets require your direct input, if you own such. The same principle applies to the other side of the balance sheet, and the income / expenses section, as well. The other boxes not colored dark blue will automatically add in through your input into each direct schedule.
- Please complete all three sections of page 1, and all nine schedules on pages 2 - 4.
- All percentage figures must be completed in decimal format (e.g. 5.00% must be input as 0.05).

NAME		SS#	DOB	NAME OF SPOUSE (if married)		SPOUSE SS#	# OF DEPENDENTS
HOME ADDRESS			CITY	STATE	ZIP	DL or ID #	EXPIRATION DATE
EMPLOYER		POSITION	YRS	BUSINESS PHONE	BUSINESS ADDRESS		

SECTION 1 BALANCE SHEET				
ASSETS		(OMIT CENTS)	LIABILITIES	(OMIT CENTS)
<b>CASH</b> <small>(Schedule 1)</small>	In American National Bank & Trust		<b>MORTGAGES PAYABLE</b> <small>(Schedule 7)</small>	Homestead
	In Other Institutions			Other Wholly-Owned R/E
<b>SECURITIES</b> <small>(Schedule 2)</small>	Marketable		<b>NOTES PAYABLE</b>	Partial Ownership in R/E
	Not Publicly Traded			To This Bank
<b>ACCOUNTS RECEIVABLE</b>			<b>OIL &amp; GAS RELATED DEBT</b> <small>(Schedule 8)</small>	Other Notes Payable
<b>NOTES RECEIVABLE</b> <small>(Schedule 3)</small>				<b>TAXES OWING</b>
<b>NET CASH VALUE OF INS. &amp; ANNUITIES</b> <small>(Schedule 4)</small>			<b>ACCOUNTS PAYABLE</b>	
<b>REAL ESTATE</b> <small>(Schedule 7)</small>	Homestead			<b>ESTIMATED CREDIT CARD BALANCE</b>
	Other Wholly-Owned R/E		<b>OTHER LIABILITIES</b> <small>(Itemize on Page 4)</small>	
	Partial Ownership in R/E		<b>TOTAL LIABILITIES</b>	
<b>OIL &amp; GAS INTERESTS</b> <small>(Schedule 8)</small>			<b>NET WORTH (Assets Less Liabilities)</b>	
<b>EQUIPMENT &amp; OTHER BUSINESS ASSETS</b>			<b>TOTAL LIABILITIES &amp; NET WORTH</b>	
<b>DEFERRED COM. &amp; RETIREMENT PLANS</b> <small>(Schedule 5)</small>				
<b>PERSONAL PROPERTY &amp; AUTOMOBILES</b>				
<b>OTHER ASSETS</b> <small>(Itemize on Page 4)</small>				
<b>TOTAL ASSETS</b>				

SECTION 2 CONTINGENT LIABILITIES	Do you have any contingent liabilities? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, give details in Section 9
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SECTION 3 INCOME / EXPENSE INFORMATION								
SOURCES OF CASH		LAST YEAR	THIS YEAR	PROJECTED NEXT	USES OF CASH		LAST YEAR	PROJECTED NEXT
(See note 2 on page 4)		DATE	DATE	DATE			DATE	DATE
<b>RECURRING</b>	SALARY & WAGES				<b>EXPENSES</b>	INCOME TAXES & FICA		
	COMMISSION, BONUS, ETC.					OTHER PAYROLL DED.		
	INTEREST & DIVIDENDS					LIVING EXP. & MISC.		
	RENTAL INCOME					RENTAL EXPENSES		
	OIL & GAS REV. AFTER OP. EXP					OIL & GAS CAP. EXPEND.		
	OTHER BUSINESS INCOME					OTHER BUSINESS EXP.		
	OTHER:					OTHER:		
<b>SUBTOTAL</b>					<b>SUBTOTAL</b>			
<b>NON-RECURRING</b>	COMMISSIONS, BONUS, ETC.				<b>DEBT SERVICE</b>	REG / SCHED. PMTS.		
	SALE OF ASSETS					OTHER INTEREST		
	TAX REFUND					OTHER PRINCIPAL		
	OTHER:					CONTINGENT LIAB.		
<b>TOTAL CASH SOURCES</b>					<b>TOTAL CASH USES</b>			
					<b>NET CASH FLOW</b>			

The above financial and supporting schedules, which are submitted to you for the purpose of obtaining credit from you, present a true, complete and correct statement of my financial condition as of the date shown. I understand that misrepresenting information on this statement is a criminal offense under federal law punishable by a fine and/or imprisonment. I will notify you in writing of any material unfavorable change in my financial condition. In the absence of such notice, you may consider this a continuing statement and substantially correct. If I apply for further credit, this statement shall have the same force and effect as if delivered as an original statement of my financial condition at the time I request such further credit. You are authorized to contact my appropriate third parties for the purpose of verifying any stated information herein or at any time furnished by me to you, and obtaining credit information at any time from any of my creditors and or credit reporting agencies. This financial statement and any other information furnished to you shall be your property. You are authorized to answer questions about your credit experience with me.

WITNESS \_\_\_\_\_ DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

OFFICIAL USE:

Loan Officer Review \_\_\_\_\_ Credit Dept. Review \_\_\_\_\_

SECTIONS 1, 2, AND 3 MUST BE COMPLETED.

**SCHEDULE 1 – DEPOSIT ACCOUNTS**

STYLE OF ACCOUNT	NAME & LOCATION WHERE HELD	BALANCE	TYPE OF ACCOUNT	ACCT NO.	RESTRICTED YES OR NO?

***In Other Institutions***


TOTAL THIS BANK  TOTAL IN OTHER INSTITUTIONS

**SCHEDULE 2A – MARKETABLE SECURITIES (STOCKS AND BONDS)**

NAME OF ISSUER	WHERE TRADED	SHARES OR PAR	MARKET PER SHARE	MARKET VALUE	COST	PLEGGED YES OR NO?	RESTRICTED YES OR NO?	REGISTERED IN NAME OF

TOTAL MARKETABLE

**SCHEDULE 2B – NONMARKETABLE SECURITIES & CLOSELY HELD INVESTMENTS**

NAME OF ISSUER	WHERE TRADED	SHARES OR PAR	MARKET PER SHARE	MARKET VALUE	COST	PLEGGED YES OR NO?	RESTRICTED YES OR NO?	REGISTERED IN NAME OF

TOTAL NOT TRADED

\*RESTRICTED\* MEANS TRADING OF THE SECURITY IS SUBJECT TO LIMITATIONS DUE TO LETTER, LEGEND OR CONTROL

**SCHEDULE 3 – NOTES RECEIVABLE**

DUE FROM	ORIGINAL AMOUNT	PRESENT BALANCE	RATE	MATURITY	PAYMENT TERMS	COLLECTABLE? YES OR NO	COLLATERAL

TOTAL TO PAGE 1

**SCHEDULE 4 – LIFE INSURANCE AND ANNUITIES (Including employer provided)**

COMPANY	FACE AMOUNT	BENEFICIARY	CASH VALUE	POLICY LOAN	NET CASH VALUE	INSURED	PLEGGED YES OR NO?

TOTAL TO PAGE 1

**SCHEDULE 5 – DEFERRED COMPENSATION & RETIREMENT PLANS\***

TRUSTEE OR PLAN ADMINISTRATOR	TYPE OF ACCOUNT	BENEFICIARY	BALANCE/VALUE	PLAN LOAN	NET PLAN VALUE	IN NAME OF	ACCESS DATE

TOTAL TO PAGE 1

\*INCLUDES I.R.A. ACCOUNTS, KEOGH, 401(k), FULLY VESTED BENEFIT PLANS, ETC.

**SCHEDULE 6 – NOTES PAYABLE (Exclude mortgages listed in Schedules 7 & 8)**

DUE TO	ORIGINAL AMOUNT	PRESENT BALANCE	RATE	MATURITY	PAYMENT TERMS	CURRENT? YES OR NO	COLLATERAL**

***In Other Institutions***


TOTAL TO PAGE 1

\*\*IF YOU ARE A COMAKER, LIST THE LOAN IN THIS SCHEDULE AND STATE THE BORROWER'S NAME IN THIS COLUMN.

### SCHEDULE 7 – REAL ESTATE OWNED (Including partnership interest)

#	LOCATION, SIZE, IMPROVEMENTS	YEAR ACQUIRED	COST & IMPROVEMENTS	MARKET VALUE	RELATED DEBT (Mark "*" by amount if not personally liable)					ANNUAL INCOME	TAXES CURRENT? YES OR NO
					PRESENT BALANCE	LIENHOLDER	MATURITY	RATE	ANNUAL PAYMENTS		
HOMESTEAD – TOTAL TO PAGE 1											
1											
OTHER WHOLLY OWNED REAL ESTATE											
2											
					TOTALS TO PAGE 1						

PARTIAL OWNERSHIP IN REAL ESTATE		%				RELATED DEBT (Mark "*" by amount if not personally liable)						
						PRESENT BALANCE	LIENHOLDER	MATURITY	RATE	ANNUAL PAYMENTS	ANNUAL INCOME	TAXES CURRENT? YES OR NO
					TOTALS TO PAGE 1							

YOUR PORTION OF MARKET VALUE AND DEBT

REGARDING SCHEDULES 7 AND 8, IF THE AMOUNT OF DEBT WHICH CAN BE LEGALLY ENFORCED AGAINST YOU EXCEEDS YOUR % OWNERSHIP, PLEASE DETAIL IN SCHEDULE 9.

### SCHEDULE 8 – OIL AND GAS INTERESTS (Including partnership interests)

#	LOCATION, DESCRIPTION, TYPE OF INTEREST AND SOURCE OF VALUATION	%	YEAR ACQUIRED	DATE OF VALUATION	PRESENT VALUATION	RELATED DEBT (Mark "*" by amount if not personally liable)					NET OPERATING REVENUE*	TAXES CURRENT? YES OR NO
						PRESENT BALANCE	LIENHOLDER	MATURITY	RATE	ANNUAL PAYMENTS		
1												
2												
3												
4												
5												
					TOTALS TO PAGE 1							

\* NET OPERATING REVENUE AFTER OPERATING EXPENSES.

