



Western National Insurance Group
 10851 N. Black Canyon Highway Suite 630
 Phoenix, AZ 85029
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 E surety@wnins.com

Business Financial Statement

Company Name:

Phone:

Fax:

Address:

Corporation S Corporation Partnership Proprietorship

Address:

Type of Work:

FINANCIAL CONDITION AS OF:

Notes A, B, C, D, & E on next page.

ASSETS		
A	Cash	\$
C	Notes Receivable	\$
C	Accounts Receivable	\$
	Inventory	\$
B	Marketable Securities	\$
	Prepaid Expenses	\$
E	Other Current Assets	\$
		\$
Total Current Assets		
	Equipment	\$
	Vehicles	\$
	Office Equipment	\$
	Real Estate	\$
	Leasehold Improvements	\$
	Depreciation	\$
C	Notes Receivable (long-term)	\$
E	Notes Receivable (long-term)	\$
	Total Other Assets	\$
	Total Assets	\$

LIABILITIES		
D	Notes Payable Banks	\$
D	Notes Payable Other	\$
D	Accounts Payable	\$
	Accrued Expenses	\$
	Accrued Taxes	\$
	Current Portion of Long Term Debt	\$
E	Other Current Liabilities	\$
		\$
Total Current Liabilities		
D	Long Term Debt	\$
D	Mortgage(s) Payable	\$
D	Long Term Debt Other	\$
	Leasehold Obligations	\$
	Deferred Taxes	\$
E	Other Liabilities (long-term)	\$
		\$
		\$
	Total Long Term Debt	\$
	Total Liabilities	\$

NET WORTH		
	Stock	\$
	Additional Paid in Capital	\$
	Retained Earnings	\$
	Treasury Stock	\$

Note A - Cash in Banks(s)

Name of Bank	Amount of Deposit	Checking, Savings, CD's?	Restricted

Note B - Marketable Securities

Name of Security	# of Shares	Par Value	Market Value	In Whose Name Registered?	Pledged

Note C - Accounts & Notes Receivable

To Whom Due	Amount	Due Date	To Whom Due	Amount	Date Due

Note D - Accounts & Notes Payable

From Whom Due	Amount	Due Date	To Whom Due	Amount	Date Due

Note E - Other Assets & Liabilities

Description of Other Assets	Amount	Description of Liabilities	Amount

The undersigned hereby agree(s) that the above financial statement is made expressly for the purpose of inducing the Company to execute a certain bond (or bonds) on behalf of

It is agreed that so long as the company shall continue to be liable on said bond (or bonds) the above statement shall be construed as a continuing representation of the financial condition of the undersigned, except as modified by subsequent written financial statements, if any, furnished the Company, and duly and properly signed by the undersigned.

The undersigned expressly agree(s) that the banks, persons, firms, and corporations above mentioned or that are concerned with any items above scheduled are hereby authorized to provide WESTERN NATIONAL MUTUAL INSURANCE COMPANY any and all information in connection with the matters herein referred to or listed.

Signed this

By