LAKE FOREST BAN	K
& TRUST COMPANY, N.A	Φ. Α
AWINTRUST COMMUNITY BAN	K

727 North Bank Lane Lake Forest, Illinois 60045 847-234-2882

PERSONAL FINANCIAL STATEMENT

IMPORTANT: Read these directions before completing this statement.

- If you are applying for individual credit in your own name and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete only Sections 1 and 3.
- If you are applying for credit with another person, complete all Sections and provide information in Section 2 about the joint applicant. If assets and liabilities are not jointly held, prepare a separate Personal Financial Statement and sign for joint intent.

This statement prepared as of:

We	intend to apply for joint credit:		
	,	Applicant Signature	Co-Applicant Signature
•			or on income or assets of another person as basis for repayment of the credit

- If you are applying for individual credit but are relying on income from alimony, child support, separate maintenance or on income or assets of another person as basis for repayment of the credit requested, complete all Sections. Provide information in Section 2 about the person whose alimony, support, or maintenance payments or income or assets you are relying on. Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.
- If this statement relates to your guaranty of the indebtedness of other person(s), firm(s), or corporation(s), complete Sections 1 and 3.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT To help the government fight the funding of terrorism and money laundering activities, the USA Patriot Act requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask you for your name, physical address, date of birth, taxpayer identification # and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. We will let you know if additional information is required.

also ask to see your driver's license or other identifying documents. We will let you know <u>SECTION 1</u>					SECTION 2							
Name (Applicant)	,			Name (Co-Applicant)								
Social Security #	,	Date of	f Birth	Social Security # Date of Birth								
Government ID: Ty	pe of ID, Issuance Date, Exp	ration Da	te, State Issued & ID #	Government ID: Type of ID, Issuance Date, Expiration Date, State Issued & ID #								
Home Address (Str		Home Address (Street Address, City, State, Zip)										
Personal Phone # Business Phone #					ne#		Business	Phone #				
Business Email/Per	sonal Email			Business Ema	il/Personal En	nail	,					
Employer	'			Employer								
Employer Address				Employer Ado	dress							
	IN RESIDENTS ONLY. ARRIED □ UNM	ARRIED	☐ LEGALLY SEPARATED	1	ONSIN RES Married	IDENTS ONLY. D UNMAF	RRIED	☐ LEGALLY SEPARATED				
SECTION 3	ASSETS*		AMOUNT	L	IABILITIES*			AMOUNT				
CASH:	Bank			UNSECURE	D NOTES:	Bank						
(Schedule 1)	At Other Banks			(Schedule 8)		At Other Banks						
SECURITIES:	Marketable			SECURED N	OTES:	Bank						
(Schedule 2)	Non-Marketable			(Schedule 8)		At Other Banks						
	Restricted or Control			OTHER NOTES & LEASES PAYABLE:								
LIFE INSURANCE	CASH VALUE (Schedule 3):			CREDIT CARD BALANCES:								
INVESTMENTS:	Closely Held Companies			DUE TO BROKERS								
(Schedule 4)	Partnership Interests			(Schedule 9):								
	Privately Owned Business											
REAL ESTATE:	Primary Residence			MORTGAGE	LOANS:	Primary Residence						
(Schedule 5)	Other Residences			(Schedule 5)		Other Residences						
	Investment					Investment						
	Partial Interest					Partial Interest						
NOTES RECEIVABLE (Schedule 6):			1									
RETIREMENT ACCTS (Schedule 7):												
AUTOMOBILES:				OTHER LIAE	BILITIES: (iten	nize below)						
OTHER PERSONA	AL ASSETS: (itemize below)											
TOTAL ASSETS	,			TOTAL LIAB	ILITIES							
				NET WORTH (Total Assets Less Liabilities								

^{*}For married Wisconsin residents, include asset and liability information for each spouse.

Personal Financial Statement as of:	
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CASH INCOME & EXPENDITURES

Statement for year en	ded:

ANNUAL INCOME	AMOUNT	ANNUAL EXPENDITURES	AMOUNT
Salary (Applicant)		Federal Income and Other Taxes	
Salary (Co-Applicant)		State Income and Other Taxes	
Bonuses & Commissions (Applicant)		Maintenance	
Bonuses & Commissions (Co-Applicant)		Mortgage Payments: Residential	
Rental Income		Investment	
Interest Income		Property Taxes: Residential	
Dividend Income		Investment	
Capital Gains		Interest & Principal Payments on Loans	
Partnership Income		Investments (Including tax shelters)	
Other Investment Income		Alimony/Child Support	
Other Income (List)**		Tuition	
		Other Living Expenses	
		Medical Expenses	
		Other Expenses (List)	
TOTAL INCOME:		TOTAL EXPENDITURES:	

^{**}Income from alimony, child support or separate maintenance need not be revealed if you do not choose to rely upon it as a basis for repaying this obligation.

CONTINGENT LIABILITIES:

	YES	NO	AMOUNT	IF YES, PLEASE EXPLAIN.
Are you responsible for payment of alimony or child support?				
Are you a guarantor, endorser or co-maker on any note?				
Are you a defendant in any legal action or suit?				
Do you have any letters of credit or surety bonds outstanding?				
Do you have any legal claims or judgments outstanding against you?				
Do you have any other tax obligations?				
Do you have an other contingent liabilities? (Itemize below or attach additional pages as needed.)				

Personal Financial Statement	as of:													
SCHEDULE 1 - CA	SH: Checki	ngs, Sa	vings, C	Ds & Money M	<u> Iarket</u> Fu	ınds								
NAME OF FINANCIAL INSTITUTION			TITLE	OF ACCOUNT		TYPE OF ACCOUNT					AMOUNT			
										+				
SCHEDULE 2 - IN		TS: L	isted M	arketable Secur	ities, Mu	tual Fun	ds 8	k ETFs						
DESCRIPTION OF SECURITY (attach separate list if necessary	I DECISION	RED IN N	IAME OF	WHERE HEL	D RES	STRICTED	N	O SHARES	BOOK VALU	JE N	IARKET VAL	UE PLI	DGED?/	WHERE
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SCHEDULE 3 - LII	EE INSURA	ANCE	L:											
INSURANCE COMPANY		Y OF OW		BENEFICIAR	v I	LICY FACE		POLICY	CASH VALU	JE	PREMIUM	1 011	DGED?/	WHERE
	NAME	OF INSU	JRED	+	A	MOUNT	┢	LOANS		+	PAYMENTS	,		
							\vdash			+				
SCHEDULE 4 - IN	VESTMEN	TS: C	Closely F	Ield Companies	s, Non-N	1arketabl	e Se	ecurities &	Unlisted S	Secur	rities			
NAME OF COMPANY	REGISTER		· ·	NO. SHARES		COST	Т	DATE	MARKET	\neg	BALANCE DI	IE DI 1	DGED?/	WHERE
TANNE OF COMPANY	REGISTE	CLD IIV IV	THATE OF	OWNED	-		PU	JRCHASED	VALUE		DALLAIVEL DV	JL III	DGLD.	WIIEKE
				1			<u> </u>							
SCHEDULE 5 - RE	AI ESTAT	F OW	/NFD.											
DESCRIPTION AND				T	T THINDED OF OTHER			YR PURCHASE		SE (ORIGINAL M		MARKET MORTGAGE	
ADDRESS	LEG.	AL OWN	ER	LENDE	IR	% OWN	ED	ACQUIRED	PRICE		MTG AMT	VALU		ALANCE
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SCHEDULE 6 - NO	TES REC	EIVAI	BLE:			,								
DUE FROM	1	OUE TO		ORIGINAL AMT PRES BALA			I REPAYMENT I SECTIFI			RITY E	IELD, IF ANY		ATE OF	NOTE
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SCHEDULE 7 - RE	TIREMEN	ТАС	COUN	ITS: Pension.	401(K) 8	z IRAs								
NAME OF FINANCIAL				TITLE OF ACCO		1		ТҮРЕ	OF ACCOUN	ЛТ		A	MOUNT	
SCHEDULE 8 - NO	OTES & LE	EASES	PAYA	BLE: Unsecure	ed & Sec	ured Inc	ludi	ng Mortga	ges					
OWED TO (ACCOUNT #)	BORRO	OWER		MATURITY	ВА	LANCE		MONTHLY F	PAYMENT	R	ATE	SECURED BY		BY
							\dashv							
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					I.									
SCHEDULE 9 - CR	EDIT ACC	COUN	NTS &	LINES: Credi	it Cards,	Credit L	ines	s & Home l	Equity Lir	nes				
ISSUER (ACCOUNT #)	BORRO	OWER		MATURITY	BA	LANCE	П	MONTHLY I	PAYMENT	R	ATE	SE	CURED I	BY.
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	EASE ANSWER THE FOLLOWING QUESTIONS:				
1.	Income tax returns filed through (date): Are any returns currently being Audited or contested? If yes, what year(s)?		□ YES	□NO	
2.	Have you or any firm in which you were a major owner ever declared bankrup If yes, please provide details here:	□YES	□NO		
3.	Have you ever drawn a will? If yes, please furnish the name of the executor(s) and year will was drawn:		□ YES	□NO	
4.	Have you ever had a financial plan prepared for you?		□ YES	□NO	
5.	Do you anticipate any material changes to this statement, within one year of th If yes, please explain:	is date?	□ YES	□NO	
CO	NTACT INFORMATION				
Nam	e of Your Accountant	Phone #			
Nam	e of Your Attorney	Phone #			
Nam	e of Your Investment Advisor/Broker	Phone #			
Nam	e of Your Insurance Agent	Phone #			
REI	PRESENTATIONS AND WARRANTIES				
or jointly continue to the Ba question	rmation contained in this statement is provided for the purpose of obtaining or maintaining credit with the Bank on behalf of the undersigned of with others execute a guaranty in the Bank's favor. Each undersigned understands that the Bank is relying on the information provided herein credit. Each undersigned represents and warrants that the information provided is true and complete and that the Bank may consider this stat which by the undersigned. The Bank is authorized to make all inquiries deemed necessary to verify the accuracy of the statements made herein and about their credit experience with the undersigned. The Bank may report information about each undersigned's account to credit bureaus. La in their credit report.	(including the desi ement as continuing d to determine each	gnation made as to ownership g to be true and correct until a n undersigned's creditworthin	of property) in deciding to gra written notice of a change is gi ess. The Bank is authorized to a	nt or ven inswer
NOTICI write to tion: Loa dwelling	E OF RIGHT TO APPRAISAL COPY: Applications submitted prior to January 18, 2014: You have the right to a copy of the appraisal report us at the mailing address provided. We must hear from you no later than 90 days after we notify you about the action taken on your credit appli are or application number (if known), date of application, name(s) of loan applicant(s), property address, and current mailing address. Applicati is: We may order an appraisal to determine the property's value and charge you for this appraisal. We will promptly give you a copy of any apprai ur own cost.	cation or you withd ons submitted on o	draw your application. In your or after January 18, 2014 for o	r letter, give us the following information credit secured by a first lien on	orma-
NOTICI Complia	E OF RIGHT TO REASONS FOR ACTIONS TAKEN: If your application for business credit is denied, you have the right to a written statemence Officer at the bank address and phone number listed on the first page of this document within 60 days from the date you are notified of our ing your request for the statement.				
NOTICE	E TO MARRIED WISCONSIN APPLICANTS: No provision of any marital property agreement, unilateral statement under s.766.59, Wis. State creditor, prior to the time the credit is granted or an open-end credit plan is entered into, is furnished a copy of the agreement, statement, or or				credi
into a bir	the Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applications on the basis of race, color, religion, ading contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good inisters compliance with this law concerning this creditor is the Office of the Comptroller of the Currency, Customer Assistance Group, P.O. I	faith exercised any	right under the Consumer Cr		
	1014 of Title 18 of the United States Code was amended to make it a federal crime for any person to knowingly make any false statement or ing in any way the action of any bank the deposits of which are insured by the Federal Deposit Insurance Corporation.	r report, or willful	ly overvalue any land, prope	rty or security for the purpose	of
	SIGNATURE		DA	ТЕ	

SIGNATURE (if joint statement)

DATE