

FHA FORM NO. 2417  
Rev. June 1963U. S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT  
FEDERAL HOUSING ADMINISTRATION**PERSONAL FINANCIAL AND CREDIT STATEMENT**OMB No. 2502-0001  
(Exp. 6/30/86)

Project Name \_\_\_\_\_ Number \_\_\_\_\_

Location \_\_\_\_\_

Statement of \_\_\_\_\_ As of \_\_\_\_\_ 19 \_\_\_\_\_

Address \_\_\_\_\_

| ASSETS  |           |    | LIABILITIES AND NET WORTH  |  |    |
|---|-----------|----|--|--|----|
| Cash on hand in banks<br>(Name of depository)                   | (Balance) |    | Accounts payable   |  | \$ |
| .....   | \$        |    | Notes payable  |  |    |
| .....   |           |    | Debts payable in less than<br>one year (secured by mort-<br>gages on land and buildings)             |  |    |
| .....   | \$        |    | Debts payable in less than<br>one year (secured by chattel<br>mortgages or other liens on<br>assets) |  |    |
| Accounts receivable   | \$        |    | Other current liabilities:<br>(describe)   |  | \$ |
| Less: Doubtful Accounts   |           |    | .....  |  |    |
| Notes receivable  | \$        |    | Total Current Liabilities  |  | \$ |
| Less: Doubtful Notes  |           |    | Debts payable in more than<br>one year (secured by mort-<br>gages on land and buildings)             |  |    |
| Stocks and Bonds - Market<br>Value (Schedule A-reverse<br>side) |           |    | Debts payable in more than<br>one year (secured by chattel<br>mortgages or other liens on<br>assets) |  |    |
| Other current assets (describe)                                 |           |    | Other liabilities (describe)   |  | \$ |
| .....   | \$        |    | .....  |  |    |
| Total Current Assets  |           | \$ | TOTAL LIABILITIES  |  | \$ |
| Real Property - at net*<br>(Schedule B-reverse side)            |           |    | Net Worth  |  |    |
| Machinery Equipment and<br>Furniture - at net                   |           |    | TOTAL LIABILITIES<br>AND NET WORTH   |  | \$ |
| Life Insurance (Cash value)                                     |           |    |  |  |    |
| Less loans  | \$        |    |  |  |    |
| Other assets (describe):  |           |    |  |  |    |
| .....   | \$        |    |  |  |    |
| .....   |           |    |  |  |    |
| .....   |           |    |  |  |    |
| TOTAL ASSETS  |           | \$ |  |  |    |

\* Cost, including improvements, less depreciation.

**Accounts and Notes Receivable:**Amounts, if any, due from partners (P), employees (E)  
or relatives (R), specify:

| Type<br>(P, E or R) | Name | Address | Amount |
|---------------------|------|---------|--------|
|                     |      |         | \$     |
|                     |      |         |        |
|                     |      |         |        |
|                     |      |         |        |

**Insurance:**Life (face value) \$ \_\_\_\_\_  
Beneficiary \_\_\_\_\_**Pledged Assets:**

| Type Pledged | Amount | Offsetting Liability |
|--------------|--------|----------------------|
|              |        |                      |
|              |        |                      |
|              |        |                      |
|              |        |                      |
|              |        |                      |
|              |        |                      |
|              |        |                      |
|              |        |                      |
|              |        |                      |

**Delinquencies:**If any taxes, mortgage payments or other liabilities are  
past due, specify:

| Type Liability | Amount | Circumstances |
|----------------|--------|---------------|
|                |        |               |
|                |        |               |
|                |        |               |

**Notes Payable:**

| Payable to | Amount | Maturity Date |
|------------|--------|---------------|
|            |        |               |
|            |        |               |
|            |        |               |

**Legal Proceedings:**If any legal proceedings have been instituted by creditors,  
or any unsatisfied judgments remain on record, give full de-  
tails:

|  |
|--|
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NOTE: If more space is required use separate sheet of paper taping on one side only.

(Over)

