## CONFIDENTIAL FINANCIAL STATEMENT

## Confidential Financial Statement as of:

| Name:  |                  | Date of Birth:              | Employer/Position: | Years           |
|--|------------------|-----------------------------|--------------------|-----------------|
|  |                  |                             |                    |                 |
| Home Address:                                  |                  | Social Security #:          | Home Phone:        | Business Phone: |
| Name of Spouse (if married see note 1 on Pg 4) | # of Dependents: | Spouse's Social Security #: | Business Address:  |                 |

| ASSETS                           |                                       | (Omit Cents) | LIABILITIE                          | 5  | (Omit Cents) |
|----------------------------------|---------------------------------------|--------------|-------------------------------------|--|--------------|
| CASH (Schedule 1)                | In this Bank<br>In Other Institutions |              | MORTGAGES PAYABLE (Schedule 7)      | Homestead<br>Other Wholly Owned R/E      |              |
| SECURITIES (Schedule 2)          | Publicly Traded<br>Privately Traded   |              | NOTES PAYABLE (Schedule 6)          | Partial Ownership in R/E<br>To This Bank |              |
| ACCOUNTS RECEIVABLE              |                                       |              |                                     | Other Notes Payable                      |              |
| NOTES RECEIVABLE (Schedule 3)    |                                       |              | OIL & GAS RELATED DEBT (Schedul     |  |              |
| NET CASH VALUE OF INS. & ANNU    | JITIES (Schedule 4)                   |              | TAXES OWING                         | Income Taxes                             |              |
| REAL ESTATE                      | Homestead                             |              |                                     | Other Taxes                              |              |
| (Schedule 7)                     | Other Wholly Owned R/E                |              | ACCOUNTS PAYABLE                    |  |              |
| (Schedule 7)                     | Partial Ownership in R/E              |              | ESTIMATED CREDIT CARD BALAN         | CE                                       |              |
| OIL & GAS INTERESTS (Schedule 8) |                                       |              | OTHER LIABILITIES (Schedule 10)     |  |              |
| OTHER BUSINESS INTERESTS (Sch    | edule 9)                              |              |                                     |  |              |
| DEFERRED COMP. & RETIREMENT      | PLANS (Schedule 5)                    |              |                                     |  |              |
| PERSONAL PROPERTY & AUTOMO       | DBILES                                |              |                                     |  |              |
| OTHER ASSETS (Schedule 10)       |                                       |              | TOTAL LIABILI                       | TIES                                     |              |
|                                  |                                       |              | NET WORTH (Assets less Liabilities) |  |              |
| TOTAL ASSI                       | ETS                                   |              | TOTAL CONTINGENT LIABILITIES        |  |              |

|           | INCOME/EXPENSE INFORMATION                |              |                      |              |                          |              |                      |  |  |  |
|-----------|---|--------------|----------------------|--------------|--------------------------|--------------|----------------------|--|--|--|
|           | SOURCES OF CASH<br>(See note 2 on page 4) | LAST<br>YEAR | PROJECT<br>THIS YEAR | USES OF CASH |                          | LAST<br>YEAR | PROJECT<br>THIS YEAR |  |  |  |
|           | SALARY & WAGES                            |              |                      |              | PERSONAL EXPENSES        |              |                      |  |  |  |
|           | COMMISSIONS, BONUS, Etc                   |              |                      | 1            | INCOME TAXES & FICA      |              |                      |  |  |  |
|           | INTEREST & DIVIDENDS                      |              |                      | s            | PROPERTY TAXES           |              |                      |  |  |  |
| Recurring | RENTAL INCOME                             |              |                      | Expenses     | BUS. & INVEST. ESP.      |              |                      |  |  |  |
| un        | OIL & GAS REV. after Op. Exp.             |              |                      | xpe          | OTHER                    |              |                      |  |  |  |
| Rec       | OTHER BUSINESS INCOME                     |              |                      | Ш            |                          |              |                      |  |  |  |
|           | OTHER (See note 1 on page 4)              |              |                      |              |                          |              |                      |  |  |  |
|           |   |              |                      |              | SUBTOTAL                 |              |                      |  |  |  |
|           | SUBTOTAL                                  |              |                      |              | MORTGAGE-HOMESTEAD       |              |                      |  |  |  |
|           | COMMISSIONS, BONUS, Etc                   |              |                      | ice          | OTHER R/E P & I PMTS.    |              |                      |  |  |  |
| gu        | SALE OF ASSETS                            |              |                      | Service      | OTHER BANK LOANS - P & I |              |                      |  |  |  |
| iun       | TAX REFUND                                |              |                      | bt S         | NOTES PAYABLE - P & I    |              |                      |  |  |  |
| Recurring | OTHER                                     |              |                      | Debt         | CONTINGENT LIABILITIES   |              |                      |  |  |  |
| Non-F     |   |              |                      |              |                          |              |                      |  |  |  |
| Ň         |   |              |                      |              | TOTAL CASH USES          |              |                      |  |  |  |
|           | TOTAL CASH SOURCES                        |              |                      |              | NET CASH FLOW            |              |                      |  |  |  |

The above financial and supporting schedules, which are submitted to you (Lender) 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 any 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.

| Signature: | Date:                | Spouse:                |             | Date:     |
|------------|----------------------|------------------------|-------------|-----------|
| Related    | Files - Customer No. |                        |             | Initials: |
|            |                      | FOR OFFICE<br>USE ONLY | Date Rec'd  |           |
|            |                      |                        | Date Logged |           |

|                 | SCHEDULE 1 - DEPOSIT ACCOUNTS (Please list IRA's on Schedule 5) |         |                 |                |             |  |  |  |  |  |  |  |
|-----------------|---|---------|-----------------|----------------|-------------|--|--|--|--|--|--|--|
| Name of Account | Name and Location Where Held                                    | Balance | Type of Account | Account Number | Restricted? |  |  |  |  |  |  |  |
|                 |   |         |                 |                |             |  |  |  |  |  |  |  |
|                 |   |         |                 |                |             |  |  |  |  |  |  |  |
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|                 |   |         |                 |                |             |  |  |  |  |  |  |  |

|                | SCHEDULE 2 - STOCKS, BONDS, AND MUTUAL FUNDS |               |              |              |      |         |            |                           |  |  |  |  |  |
|----------------|--|---------------|--------------|--------------|------|---------|------------|---------------------------|--|--|--|--|--|
| Name of Issuer | Where Traded                                 | Shares or Par | Market/Share | Market Value | Cost | Pledged | Restricted | Restricted in the name of |  |  |  |  |  |
|                |  |               |              |              |      |         |            |                           |  |  |  |  |  |
|                |  |               |              |              |      |         |            |                           |  |  |  |  |  |
|                |  |               |              |              |      |         |            |                           |  |  |  |  |  |
|                |  |               |              |              |      |         |            |                           |  |  |  |  |  |
|                |  |               |              |              |      |         |            |                           |  |  |  |  |  |
|                |  |               |              |              |      |         |            |                           |  |  |  |  |  |
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|                |  |               |              |              |      |         |            |                           |  |  |  |  |  |

"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 | Collectible? | Collateral |  |  |  |  |  |
|          |                               |                 |      |          |               |              |            |  |  |  |  |  |
|          |                               |                 |      |          |               |              |            |  |  |  |  |  |
|          |                               |                 |      |          |               |              |            |  |  |  |  |  |
|          |                               |                 |      |          |               |              |            |  |  |  |  |  |
| L        | Total to Page 1               |                 |      |          |               |              | 1          |  |  |  |  |  |

| SCHEDULE 4 - LIFE INSURANCE AND ANNUITIES (including employer provided) |             |             |            |                 |                |         |  |  |  |  |  |
|---|-------------|-------------|------------|-----------------|----------------|---------|--|--|--|--|--|
| Company   | Face Amount | Beneficiary | Cash Value | Policy Loan     | Net Cash Value | Insured |  |  |  |  |  |
|   |             |             |            |                 |                |         |  |  |  |  |  |
|   |             |             |            |                 |                |         |  |  |  |  |  |
|   |             |             |            |                 |                |         |  |  |  |  |  |
|   |             |             |            |                 |                |         |  |  |  |  |  |
|   |             |             |            | 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 |                |            |             |  |  |  |  |

| SCHEDULE 6 - NOTES PAYABLE (Excluding mortgages listed in Schedules 7 & 8) |                 |                 |      |          |               |          |            |  |  |  |  |
|--|-----------------|-----------------|------|----------|---------------|----------|------------|--|--|--|--|
| Due To   | Original Amount | Present Balance | Rate | Maturity | Payment Terms | Current? | Collateral |  |  |  |  |
|  |                 |                 |      |          |               |          |            |  |  |  |  |
|  |                 |                 |      |          |               |          |            |  |  |  |  |
|  |                 |                 |      |          |               |          |            |  |  |  |  |
|  |                 |                 |      |          |               |          |            |  |  |  |  |
|  | Total to Page 1 |                 |      |          |               |          |            |  |  |  |  |

|                                |          |              | SCHEDU | JLE 7 - MORTGAC |                  |                |            |                 |               |
|--------------------------------|----------|--------------|--------|-----------------|------------------|----------------|------------|-----------------|---------------|
| Leasting Cine Laurana          | Year     | Cost &       | Market | Related         | Debt (Mark ***   | by amount if r | ot persona | lly liable)     | A             |
| Location, Size, Improvements   | Acquired | Improvements | Value  | Present Balance | Lienholder       | Maturity       | Rate       | Annual Payments | Annual Income |
| Homestead - Total to Page 1    |          | _            |        | •               |                  |                |            |                 | •             |
|                                |          |              |        |                 |                  |                |            |                 |               |
| Other Wholly Owned Real Estate |          |              |        |                 |                  |                |            | -               | •             |
|                                |          |              |        |                 |                  |                |            |                 |               |
|                                |          |              |        |                 |                  |                |            |                 |               |
|                                |          |              |        |                 |                  |                |            |                 |               |
|                                |          |              |        |                 |                  |                |            |                 |               |
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|                                |          |              |        |                 |                  |                |            |                 |               |
|                                |          |              |        |                 |                  |                |            |                 |               |
|                                |          |              |        |                 |                  |                |            |                 |               |
|                                |          |              |        |                 |                  |                |            |                 |               |
|                                |          |              |        |                 |                  |                |            |                 |               |
|                                |          |              |        |                 |                  |                |            |                 |               |
|                                |          |              |        |                 |                  |                |            |                 |               |
|                                |          |              |        |                 |                  |                |            |                 |               |
|                                |          |              |        |                 |                  |                |            |                 |               |
|                                |          |              |        |                 |                  |                |            |                 |               |
|                                |          |              |        |                 |                  |                |            |                 |               |
|                                |          |              |        |                 |                  |                |            |                 |               |
|                                |          |              |        |                 |                  |                |            |                 |               |
|                                |          |              |        |                 |                  |                |            |                 |               |
|                                |          |              |        |                 | Totals to Page 1 |                |            |                 |               |

| Partial Ownership in Real Estate | %      | 1 |  |                  |  |  |
|----------------------------------|--------|---|--|------------------|--|--|
|                                  |        |   |  |                  |  |  |
|                                  |        |   |  |                  |  |  |
|                                  |        |   |  |                  |  |  |
|                                  |        |   |  |                  |  |  |
|                                  |        |   |  |                  |  |  |
|                                  |        |   |  |                  |  |  |
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|                                  |        |   |  |                  |  |  |
|                                  |        |   |  |                  |  |  |
|                                  |        |   |  |                  |  |  |
|                                  |        |   |  |                  |  |  |
|                                  |        |   |  |                  |  |  |
|                                  |        |   |  |                  |  |  |
|                                  |        |   |  |                  |  |  |
| Your Portion of Market Value an  | d Debt |   |  | Totals to Page 1 |  |  |

| SCHEDULE 8 - OIL & GAS INTERESTS                                   |   |          |           |           |                  |              |          |      |             |               |
|--|---|----------|-----------|-----------|------------------|--------------|----------|------|-------------|---------------|
| Location, Description, Type of Interest<br>And Source of Valuation | tion, Description, Type of Interest Year Date of Present Related Debt (Mark *** by amount if not personally liable) |          |           |           |                  | ally liable) | A 1.T    |      |             |               |
| And Source of Valuation  | %   | Acquired | Valuation | Valuation | Present Bal      | Lienholder   | Maturity | Rate | Annual Pmts | Annual Income |
|  |   |          |           |           |                  |              |          |      |             |               |
|  |   |          |           |           |                  |              |          |      |             |               |
|  |   |          |           |           |                  |              |          |      |             |               |
|  |   |          |           |           |                  |              |          |      |             |               |
|  |   |          |           |           |                  |              |          |      |             |               |
|  |   |          |           |           |                  |              |          |      |             |               |
| NET OPERATING REVENUE AFTER OPERATING EXPENSES                     |   |          |           |           | Totals to Page 1 |              |          |      |             |               |

| SCHEDULE 9 - OTHER BUSINESS INTERESTS (partnerships, closely held businesses) |                    |             |       |            |               |
|---|--------------------|-------------|-------|------------|---------------|
| Business Name   | Nature of Business | % Ownership | Value | How Valued | Business Bank |
|   |                    |             |       |            |               |
|   |                    |             |       |            |               |
|   |                    |             |       |            |               |
|   |                    |             |       |            |               |
|   |                    |             |       |            |               |
|   |                    |             |       |            |               |

## SCHEDULE 10 - OTHER ASSETS, LIABILITIES, AND/OR ADDITIONAL REMARKS

| SCHEDULE 11 - CONTINGENT LIABILITIES   |  |    |  |  |  |
|--|--|----|--|--|--|
| Instructions: State total amount by type of liability and provide appropriate detail in the space below. |  |    |  |  |  |
| 1. As Guarantor or Endorser  | 5. Standby, Letter of Credit                                       |    |  |  |  |
| 2. On Leases or Contracts  | <ol><li>Liability in Excess of % in Partially Owned Asse</li></ol> | ts |  |  |  |
| <ol><li>Legal Claims or Judgements</li></ol>   | 7. Tax liability if Assets Sold at State Values                    |    |  |  |  |
| 4. Income Tax Claim or Disputed Amount   | 8. Other   |    |  |  |  |

| Type # | Name of Party Receiving Benefit | Obligation Amount<br>Timing of Payments | Explanation: Include Whether You Anticipate<br>Having to Honor This Liability | Maturity of Expiration Date |
|--------|---------------------------------|---|---|-----------------------------|
|        |                                 |   |   |                             |
|        |                                 |   |   |                             |
|        |                                 |   |   |                             |
|        |                                 |   |   |                             |
|        |                                 |   |   |                             |
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|        |                                 |   |   |                             |
|        |                                 |   |   |                             |
|        |                                 |   |   |                             |

I understand that the following questions are addressed to me and I have answered them as appropriate.

| Yes        | No           | 1. Are any of the assets held in trust, in an estate, or in any other name or capacity?   |
|------------|--------------|---|
| Yes        | No           | 2. Were any of the assets (1) owned or claimed by your spouse before marriage; or (II) acquired by your spouse during marriage by gift of inheritances; or (III) acquired from the proceeds of liquidation of any of the preceding? |
| Yes        | No           | 3. Are any of your real estate properties used by you in your business?   |
| Yes        | No           | 4. Do any of your assets secure any debts which have not been reported in the preceding schedules?  |
| Yes        | No           | 5. Are you a party to any suit or are there any unsatisfied judgements against you?   |
| Yes        | No           | 6. Have you been through bankruptcy or made an assignment for benefit of creditors?   |
| I have exp | lained fully | under "Additional Remarks" on this page and "Yes" answers to the foregoing questions.   |
| Yes        | No           | 7. I have made a will; the executor is  |

NOTES: 1. If you are married and reside in Texas or another community property state, complete this item by stating the income of your spouse.

2. Alimony, child support, or seperate maintenance income need not be revealed unless you wish to have them considered as a basis for repaying the requested credit.