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Name		;	Social Security Number				Date of Birth		
Home Address				Home Phone					
Instructions									
Please fill in your assets and liabilities in the appropriate spaces. Total assets should = total liabilities + Net Worth.				DATE OF STATEMENT					
Assets (\$)					Liabilities (\$) Payments				
Cash (\$)				Real Estate mortgage (Complete Schedule 1)				
Investment—Stocks & Bonds				Installment Loans (Number) Payments At \$					
Accounts & Loans Receivable				Credit Card Balance					
Real Estate Owned (Complete Schedule 1)				Federal Income Tax					
Auto Year Make				Other Liabilities					
Auto Year Make				TOTAL LIABILITIES					
Individual Retirement Account / Pension Fund				NET WORTH (Total Assets Minus Total Liabilities					
Other Assets									
TOTAL ASSETS				TOTAL LIABILITIES +	NET WORTH				
Sources of Income				Personal Information					
ALIMONY—CHILD SUPPORT Inclusion of alimony, separate maintenance, or child support as income is voluntary and need not be revealed if you do not wish to have it considered. If you choose to include such payment, please describe it by the court and				Occupation Or Type of Business:					
case number, the amount, and the name and address of the person obligated to pay that amount to you. If you are responsible for paying alimony, separate maintenance, or child support, please give particulars of the obligation, along with your other obligations.			ay nce, or	Employer:					
				Position Held:					
Salary				How Long Employed:					
Bonus & Commissions				Number of Dependents (List):					
Dividends & Interest				1) 2)					
Net Rents & Royalties				- 3) 4)					
Other (Itemize)						4)			
TOTAL ANNUAL INCOME			5) 6)						
Schedule 1	Location & Date Purchased	Purchase Pr	rice	Current Value	Balance Ow	red [Monthly Payments	Mortgage Holder	
Real Estate Owned									
information from other	application is given to us for the purpors concerning your credit standing and	other relevant informa	ation imp	pacting this application	and to provide to	o others in	formation about our	transactions and	

information from others concerning your credit standing and other relevant information impacting this application and to provide to others information about our transactions and experiences with you. In addition to the information requested on this application, EI Dorado Commercial Finance LLC may subsequently request additional information from you. IMPORTANT INFORMATION: Except as otherwise prohibited by law, you agree and consent that we, EI Dorado Commercial Finance LLC and it subsidiaries, may share all information about you that EI Dorado Commercial Finance LLC has or may obtain. Under the Fair Credit Reporting Act, there is certain credit information that cannot be shared if you tell us by writing to EI Dorado Commercial Finance LLC, 22 Moonlight, Irvine CA 92603 including your name, address, account number and social security number.

SIGNATURE	<u>DATE</u>
SIGNATURE	DATE