

Confidential Personal Financial Statement



- Individual** If this is an individual statement, list all income, expenses and assets, including partial ownership in and income from partially owned assets and all direct and contingent liabilities in the schedules below.
- Joint** If this is a joint financial statement, list joint income, expenses and assets, including partial ownership in and income from any partially owned assets and all direct and contingent liabilities in the schedules below. Separate Personal Financial Statement may be provided for each individual if preferred.

We intend to apply for Joint Credit. Applicant Signature: _____ Joint Applicant Signature: _____

Statement of Financial Condition as of _____

Individual (First, Middle, Last – please print)				Date of Birth		Employer		Years	
Home Address			Phone	Social Security Number		Occupation	Years	Position	Years
City	State	Zip	No. of	Driver's License No.	State	Business Address		Phone	
Individual (Complete if Joint Statement)				Date of Birth		Employer		Years	
Home Address			Phone	Social Security Number		Occupation	Years	Position	Years
City	State	Zip	No. of	Driver's License No.	State	Business Address		Phone	

ASSETS		\$ Amount	LIABILITIES & NET WORTH		\$ Amount
1.	Cash on hand, and Unrestricted in Bank (See Schedule 1)		10.	Loans against Life Insurance (See Schedule 3)	
2.	Marketable Stocks and Securities (See Schedule 2)		11.	Loans against Deferred Comp and Retirement Plan (See Schedule 4)	
3.	Life Insurance, Cash Surrender Value (See Schedule 3)		12.	Vehicles, Boats, Machinery Notes Payable (See Schedule 5)	
4.	Deferred Comp. & Retirement Plan (See Schedule 4)		13.	Mortgage Payable (See Schedule 6)	
5.	Vehicles, Boats, Machinery - Registered in own name (See Schedule 5)		14.	Other Notes Payable, Secured and Unsecured (See Schedule 9)	
6.	Real Estate (See Schedule 6)		15.	Other Liabilities (See Schedule 10)	
7.	Stock in Closely Held Corporations (See Schedule 7)		16.	Total Liabilities	
8.	Other Assets (See Schedule 8)		17.	Net Worth (Line 9 less Line 16)	
9.	Total Assets		18.	Total Liabilities and Net Worth (Line 16 plus Line 17)	

Type of Income	Source	Annual Amount	Joint Owner Source of Income	Source	Annual Amount
Salary			Salary		
Other Income (Bonus, Commissions, Dividends,)*			Other Income (Bonus, Commissions, Dividends, Alimony, Child Support)		
Other Income			Other Income		
Real Estate Income			Real Estate Income		
Total			Total		

*Alimony or child support payments should not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

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Please complete all appropriate schedules. If space is inadequate, insert rows or attach additional sheet.

Schedule 1 – Deposit Accounts

Name(s) of Account Holder(s)	Deposit Institution and Location	Type of Account	Account Number	Pledged? Yes or No	Balance

Schedule 2 – Marketable Stocks and Securities (Does not include stock held in closely held corporations – See schedule 7)

Name of Issuer	Registered in Name of	Shares	Total Market Value	Pledged? Yes or No	Restricted? Yes or No*
		Value per Share			

* "Restricted" means trading of the Security is subject to limitations due to letter, legend or control.

Schedule 3 – Life Insurance and Annuities (Including Employer Provided)

Company	Name of Person Insured	Face Amount	Beneficiary	Cash Value	Loan Against Policy	Net Cash Value	Pledged? Yes or No

Schedule 4 – Deferred Compensation & Retirement Plans*

Trustee or Plan Administrator	In Name of	Type of Account	Beneficiary	Balance/ Value	Loan Against Plan	Net Plan Value	Access Date

*Includes IRA Accounts, KEOGH, 401K, Fully Vested Benefit Plans, etc.

Schedule 5 – Vehicles, Boats, Machinery and Equipment Owned

Description (Year, Make and Model)	Owner Name	Loan Balance	Market Value	Maturity	Lender	Monthly Payments

Schedule 6 – Real Estate Owned

Description / Collateral	Owner Name	Cost	Loan Balance	Market Value	Maturity	Lienholder	Monthly Payments
		Yr. Acquired					

Schedule 7 – Stock in Closely Held Corporations*

Name of Corporation	Stock in the Name of	% Ownership	Number of Shares Owned	Total Value of Shares Owned	Annual Statement Date	Total Shares Outstanding

*Please ensure related contingent liabilities are reported in *Additional Info* section.

Schedule 8 – Other Assets (Please list)

Description (Personal Property, Accounts/Notes Receivable, etc. - Include market value)	Market Value

Schedule 9 – Other Notes Payable, Secured and Unsecured (Not included in *Vehicles, Boats, Machinery & Equipment* or *Real Estate Owned* schedules)

Description / Collateral	Borrower Name	Maturity	Loan Balance	Lender	Monthly Payments

Schedule 10 – Other Liabilities (e.g. Taxes Payable, Brokers' Margin Accounts, etc. Please list)

Description (Type, Entity/Individual Owed, Amount, Method of Repayment, etc.)	Monthly Payment	Loan Balance

Additional Info:

Contingent Liabilities (Please provide details on business debt that you personally guaranty, not included in the balance sheet above)

Description / Collateral	Borrower Name	% of Guaranty	Loan Balance	Lender	Monthly Payments

For the purpose of obtaining credit, direct or indirect, and any other accommodations or benefits from South State Bank, (the "Bank"), from time to time, I/we submit this statement of my/our financial condition as of the date indicated above. In consideration of the premises, I/we agree to notify the Bank of any changes affecting my/our financial responsibility and will at any time upon request furnish the Bank a then current statement of my/our financial condition, said statement to be in such form as required by the Bank.

I/we certify as a basis for credit that to the best of my/our knowledge and belief, the information furnished and all representations made herein constitute the true and correct statement of my/our financial condition; that I/we have no assets or liabilities other than as shown on this statement; that all my/our assets are free of lien or assignment except as shown herein and that there are no judgments outstanding or suits pending against me/us. You are authorized to answer any questions about your credit experience with me/us and furnish to the Bank or any of its subsidiaries information which I/we have provided to you and information regarding my/our accounts.

Bank is authorized to verify with other parties and to make any investigation of my/our credit, either directly or through any agency employed by Bank for that purpose. Additionally, the undersigned individuals hereby authorize Bank to obtain my/our personal credit report(s).

DISCLOSURES

Customer Identification/USA Patriot Act: To help the government fight the funding of terrorism and money laundering activities, Federal law 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 for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

Notice of Denial: If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please write us at: South State Bank, Attn: Adverse Action, 700 Gervais Street, Suite 400, Columbia, SC 29201 within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement.

ECOA Notice: The federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is the **Bureau of Consumer Financial Protection 1700 G Street NW, Washington, DC 20006.**

Signature of Individual

Date

Signature of Joint Signer

Date