BABB
BABB BONDING, INC.

Babb Bonding, Inc.
PO Box 6255 / 801 E. Kiehl
Sherwood, AR 72124
501-834-5801 Fax: 501-834-7526

FINANCIAL STATEMENT as of _____ .

NAME	SOCIAL SECURITY NO.	EMPLOYER	HOW LONG
HOME ADDRESS	PHONE	DL #	DATE OF BIRTH
BUSINESS ADDRESS CITY, STATE, ZIP	PHONE	OCCUPATION/POSITION	
CO-BORROWER	SOCIAL SECURITY NO.	DL #	Spouse
OCCUPATION/POSITION	PHONE		

SECTION A: ASSETS

CASH	(Schedule 1)	
MARKETABLE SECURITIES	(Schedule 2)	
NON-MARKETABLE SECURITIES	(Schedule 3)	
NET CASH VALUE LIFE INSURANCE	(Schedule 4)	
INVESTMENT IN PARTNERSHIPS	(Schedule 5)	
REAL ESTATE	(Schedule 6)	
IRA'S, KEOGHS, & OTHER QUALIFIED PLANS	(Schedule 7)	
OIL & GAS INTERESTS	(Schedule 8)	
NOTES RECEIVABLE	(Schedule 9)	
OTHER ASSETS		
Personal Property		
Automobiles		
Interests in Trusts		
Misc.		
TOTAL ASSETS		0.00

SECTION B: LIABILITIES

REAL ESTATE/MORTGAGES PAYABLE	(Schedule 6)	
NOTES PAYABLE	(Schedule 10)	
MARGIN DEBT DUE BROKERS	(Schedule 2)	
PARTNERSHIP RELATED DEBT	(Schedule 5)	
OIL & GAS RELATED DEBT	(Schedule 8)	
TAXES PAYABLE		
CREDIT CARD DEBT		
OTHER LIABILITIES		
TOTAL LIABILITIES		0.00
NET WORTH (Total Assets Less Total Liabilities)		0.00
TOTAL LIABILITIES PLUS NET WORTH		0.00

SECTION C: CASH INCOME AND CASH EXPENSE INFORMATION*

CASH INCOME*	THIS YEAR _____
GROSS WAGES OR SALARIES	
COMMISSIONS, BONUSES, ETC.	
PARTNERSHIP DRAWS, ETC.	
PARTNERSHIP DISTRIBUTIONS	
INTEREST & DIVIDENDS	
RENTAL INCOME	
OIL & GAS INCOME	
NOTES RECEIVABLE CASH RECEIPTS	
OTHER	
TOTAL CASH INCOME	0.00

CASH EXPENSES*	THIS YEAR _____
REAL ESTATE/MORTGAGE PAYMENTS	
REGULARLY SCHEDULED PRINCIPAL/INTEREST PAYMENTS	
INCOME TAXES (SUM OF A YEAR'S PERIODIC PAYMENTS)	
PARTNERSHIP CONTRIBUTIONS	
OTHER TAXES (REAL ESTATE, ETC.)	
LIVING EXPENSES & MISC.	
RENTAL EXPENSES	
INSURANCE PAYMENTS	
OTHER ANTICIPATED PAYMENTS (ALIMONY, TUITION, ETC.)	
OTHER	
TOTAL CASH EXPENSES	0.00
NET CASH FLOW (CASH INCOME LESS CASH EXPENSES)	0.00

*Income from 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.
**List all assumptions on page 4 under Additional Comments and describe any significant expected changes in your cash income or your cash expenses.

In the following statement, the words "I", "me", and "my" mean anyone signing below. "You" and "your" refer to Babb Bonding, Inc. and related entities.

I have given you this financial statement, and attachments, if any, in order to obtain credit or services from you. I understand that you will rely on this information in connection with any decision you make in providing credit or services to me. I warrant and represent to you that this financial statement and any other information I supply to you is correct and fully and accurately discloses all of my assets and liabilities, including, but not limited to, my contingent liabilities, cash income, and cash expenses as of the date I provide this information to you. All appraisals and similar indications of value relating to my assets which are available to me as of this date are attached for your review. You may assume that my financial condition is at least as good as shown on this statement until I provide to you another updated financial statement. You may request credit information about me from others including an investigative consumer report and you may request a consumer credit report about me in connection with this statement for credit or services. If I ask you, you will tell me whether or not a consumer credit report was requested and will also tell me the name and address of the reporting agency. I give you my permission to obtain additional consumer credit reports and investigative consumer reports without telling me should you update, renew, extend, or review my credit or other service arrangements with you. You may also share credit information about me with your affiliates, subsidiaries, parent company, other creditors, and all others permitted or required by law. I understand that, in the event any information contained in this statement is incorrect, false, or misleading and you incur a loss, you may file a Criminal Referral Form as may be requested or required by your supervisory agency. I also understand that knowingly providing false of misleading information in this financial statement is a federal offense that may subject me to fine, imprisonment or both (18 USC Section 1014).

ATTENTION: CONTINGENT OBLIGATIONS SCHEDULE MUST BE COMPLETED.
IF NONE, THEN WRITE NONE ON THE SCHEDULE.

SIGNATURE	DATE	SIGNATURE	DATE

SCHEDULE 1 - CASH

1 ACCOUNT NAME	BANK/BRANCH NAME & ADDRESS	BALANCE	ACCOUNT TYPE/NUMBER	PLEDGED Y or N?
		0.00		

SCHEDULE 2 - MARKETABLE SECURITIES (Stocks, Bonds, Gov't Issues, Mutual Funds, etc.)

2 DESCRIPTION OF SECURITIES	FACE VALUE OR # SHARES	CURRENT MARKET VALUE	PLEDGED Y or N?	MARGIN DEBT	YEARLY DIVIDEND INCOME
NAME OF BROKERAGE FIRM/BROKER		0.00			0.00

SCHEDULE 3 - NON-MARKETABLE SECURITIES

3 DESCRIPTION OF SECURITIES	FACE VALUE OR # SHARES	CURRENT MARKET VALUE	COST	PLEDGED Y OR N?
		0.00		

SCHEDULE 4 - LIFE INSURANCE

4 COMPANY	FACE AMOUNT	CASH SURRENDER OR LOAN VALUE	POLICY LOAN (IF ANY)	NET CASH VALUE	IS POLICY OR C/V ASSIGNED	BENEFICIARY

SCHEDULE 5 - INVESTMENTS IN PARTNERSHIPS

5 PARTNERSHIP NAME	GENERAL, LIMITED, OTHER	% OWNED	COST	CURRENT MARKET VALUE	PARTNERSHIP RELATED DEBT BALANCE	PARTNERSHIP RELATED DEBT YEARLY PAY. TERMS	YEARLY DISTRIB.	YEARLY CONTRIB.
		0%						
		0%						
		0%						
		0%						
				0.00	0.00		0	0

SCHEDULE 6 - REAL ESTATE

6 LOCATION (Address & Property description; List homestead first)	% OWNED	COST DATE ACQUIRED	MARKET VALUE	ORG. BAL.	RELATED DEBT CUR. BAL.	RELATED DEBT LIENHOLDER	RELATED DEBT YEARLY PAY. TERMS	YEARLY RENTAL INCOME	YEARLY RENTAL EXPENSE
	0%								
	0%								
	0%		0%						
	0%								
			0		0			0	0

SCHEDULE 7 - IRA'S, KEOGH'S & OTHER QUALIFIED PLANS

7 TYPE	% VESTED	CURRENT BALANCE	LOANS	NET VALUE
	0%			
	0%			
	0%			
				0.00

SCHEDULE 8 - OIL AND GAS INTERESTS

8 TYPE OF INTEREST	% OWNED	VALUATION	RELATED DEBT BALANCE	RELATED DEBT LIENHOLDER.	RELATED DEBT YEARLY PAY. TERMS.	YEARLY OIL & GAS INCOME	YEARLY OIL & GAS EXPENSES
	0%						
	0%						
	0%						
	0%						
		0	0		0	0	0

SCHEDULE 9 - NOTES RECEIVABLE

9 NAME & ADDRESS OF MAKER	PURPOSE	ORIGINAL DATE	ORIGINAL AMOUNT	BALANCE	MATURITY	YEARLY PAY. TERMS	COLLATERAL
				0		0	

SCHEDULE 10 - NOTES PAYABLE

(exclude mortgage, partnership, real estate, and oil & gas related debt)

10 NAME & ADDRESS OF FINANCIAL INSTITUTION	PURPOSE	ORIGINAL DATE	ORIGINAL AMOUNT	BALANCE	MATURITY	YEARLY PAY. TERMS	COLLATERAL
				0		0	

SCHEDULE 11 - CONTINGENT OBLIGATIONS

11 Instructions: State Total Amount By Type of Liability and Describe

A.	AS GUARANTOR OR ENDORSER	$	E.	LETTERS OF CREDIT	$
B.	ON LEASES OR CONTRACTS	$	F.	FUTURE CAPITAL CONTRIBUTIONS	$
C.	FOR LEGAL CLAIMS OR JUDGMENTS	$	G.		$
D.	INCOME TAX CLAIM OR DISPUTE	$	**TOTAL: A-G**		$ 0.00

DESCRIBE (A-G ABOVE)	BENEFICIARY PARTY	AMOUNT OBLIGATED AND WHEN OBLIGATED	PURPOSE OR EXPLANATION	MATURITY OR EXPIRATION DATE

OTHER INSURANCE COVERAGE		
AUTO	HOME/REAL ESTATE	HEALTH/DISABILITY
INSURANCE CO.	INSURANCE CO.	INSURANCE CO.
POLICY NO.	POLICY NO.	POLICY NO.
COVERAGE	COVERAGE	COVERAGE
AGENT NAME	AGENT NAME	AGENT NAME
PHONE #	PHONE #	PHONE #

NAME OF YOUR PERSONAL ATTORNEY

1. Are you a defendant in any suits or legal actions? ○ No ○ Yes, if yes, describe under additional comments.
2. Income taxt returns filed through (date)_____ Are returns being audited or contested? ○ No ○ Yes, if yes what year(s)?_____
3. Have you drawn a will? ○ No ○ Yes, if yes, year drawn _____. Executor/trix _____
4. Do you have a line of credit or unused line of credit at any other institution? ○ No ○ Yes, if yes, indicate how much and where.

_____

5. Have you ever filed a petition in bankruptcy or has one been filed involuntarily against you? ○ No ○ Yes, if yes, explain under additional comments.
6. Are you an Executive Officer, Director, or Principal Shareholder of a bank? ○ No ○ Yes, Name of Bank_____

ADDITIONAL COMMENTS