



RLI Surety
A Division of RLI Insurance Company

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IL Fax: (309) 692-8637 • TX Fax: (972) 241-6225 • WA Fax: (425) 672-3993	
<input type="checkbox"/> Check here if correspondence was previously faxed to RLI	
RLI Insurance Company	Bond No.
To: _____	Form
From: _____	Code

Personal Financial Statement Form

Name _____ Date of Birth _____ Soc. Sec. No. _____

Name _____ Date of Birth _____ Soc. Sec. No. _____

Residence Address _____

Statement of Assets and Liabilities as of _____.			
ASSETS		LIABILITIES	
Cash on Hand	\$ _____	Notes Payable	\$ _____
Cash in following banks:		Accounts Payable	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	Taxes Due	\$ _____
Marketable Securities	\$ _____	Mortgages on Real Estate	
_____	\$ _____	Description and location	
_____	\$ _____	1. _____	\$ _____
Notes Receivable	\$ _____	2. _____	\$ _____
Real Estate in MY name		3. _____	\$ _____
Description and location		Other Liabilities (describe)	
1. _____	\$ _____	_____	\$ _____
2. _____	\$ _____	_____	\$ _____
3. _____	\$ _____	TOTAL LIABILITIES	\$ _____
Personal Property		NET WORTH	\$ _____
_____	\$ _____	TOTAL LIABILITIES AND	
Other Assets (describe)		NET WORTH	\$ _____
_____	\$ _____	TOTAL LIABILITIES AND	
TOTAL ASSETS	\$ _____	NET WORTH	\$ _____

The undersigned hereby certifies that the list of assets and liabilities given herein is a true and correct statement of the financial condition on the date given above and that the depositories are hereby authorized to confirm any inquiry made by **RLI Insurance Company** or its representatives as to any statement made herein relative to monies on deposit or loans made.

Dated this _____ day of _____, _____.

AGENCY INFORMATION	Agency Name: _____
	Agency Code: _____
	Address: _____

	Agent's Phone: _____
	Agent's Fax: _____

X _____
(Sign here)

X _____
(Sign here)