	Com	mercial]	Debtoi	r Financial (Statem	ent		
Complete all blocks, except sl			_	_				
Sign, Print, and Submit form	to Fax: 217-7				30x 19296	5, Sprin	gfield, IL 62794-92	296
1 Name and address of business		28	Susiness pho	one number				
		3 (0	Check appro	opriate box)				
			Sole Propri			Other ((specify)	
			Partnership					
			Corporatio	n				
4 Name and title of person being interviewed			imployer ide	entification number		6 Type	of business	
7 Information about owner, partners, of	fficars major shar	aholder etc						
Name of Institution	Effective		Home Ad	dress	Pho	ne	Social Security	Total Shares
	Date				Num	ber	Number	of Interest
Castian I Cananal Finan	aial Tafaras	a4 : a						
Section I General Finan	Form	auon		Tax year ended			Net income before ta	NAC .
8 Latest filed income tax return	Tom			Tax year chided			Net income before to	ixes
9 Bank accounts (List all types of acco	ounts including pay	roll and gener	al, savings,	certificates of deposit	t, etc.)			
Name of Institution	Address			Type of Accou	unt Acco		ount No.	Balance
			Total (E)	nter in item 17)			>	
10 Bank credit available (Line of credit			`	, , , , , , , , , , , , , , , , , , ,				
Name of Institution	Address			Credit Limit Amount Owe		t Owed	Credit Monthly Available Payments	
TF: 4-1:- /TF: !		<u> </u>	-/					
Totals (Enter in	и иетѕ 24 or 25 с	as appropriat	e) >					
11 Location, box number, and contents	of all safe deposit	boxes rented o	r accessed.		•			

Section I (continued) Gener	al Financial Informa	ation						
12 Real Property								
Brief description and	type of ownership		Physical Address					
a								
					County			
b								
					County			
c					County			
d					County			
u								
					County			
13 Life insurance policies owned with busing Name Insured	iness as beneficiary Company	Policy Number	Туре	Face Amount	Available Loan Value			
Name insured	Company	Foncy Number	Туре	race Amount	Available Loan value			
Total (Enter in item 19)				>				
14a Additional information regarding final	ncial condition (Court proceeding	ngs hankruptcies filed or antic	inated transfers	of assets for less tha	n full value, changes in			
market conditions, etc. Include information				.,				
b If you know of any person or	(i) Who borrowed the funds?							
organization that borrowed or otherwise								
provided funds to pay net payrrolls:								
15.4		1 1 1 000						
15 Account/notes receivable (include curre Name	Address	Amount Due	Date	Due	Status			
Name	rida ess	Amount Duc	Date	Duc	Status			
				+				
Total (Enter in item 18)	•							

	tion II A	a)	(b)	(c)	(d)	(e)	(f)	(o)	(h)
(a) Description			Cur. Mkt. Value	Liabilities Bal. Due	Equity In Asset	Amount of Mo. Pymt.	Name and Address of Lien/Note Holder/Obligee	(g) Date Pledged	(h) Date of Final Pymt.
16 C	ash on hand								
17 B	ank Accounts								
18 A	.ccounts/Notes	receivable							
19 L	ife insurance lo	an value							
20	Real	a							
	Property (from item 12)	b							
		С							
	Vehicles (model, year,	a							
	and license)	b							
		С							
22	Machinery and equipment (specify)	a							
		b							
		С							
	Merchandise inventory (specify)	a							
		b							
	Other assets (specify)	a							
		b							
	Other Liabilities (including notes and	a							
(b							
J	judgements)	С							
		d							
		e							
		f							
		g							
		h							
26 Fe	ederal taxes ow	ed (prior years)							
27 T	otal								

Section III Income and Expense Analysi	is						
The following information applies to income and expenses durin to		Accounting method used					
Income	Expe	Expenses					
28 Gross receipts from sales, services, etc.	34 Materials purchased						
29 Gross rental income	(Number of employees) 35 Net wages and salaries						
30 Interest,	36 Rent						
31 Dividends	(Treasury use only) 37 Allowable installment payments						
32 Other income (specify)	38 Supplies						
	39 Utilities/telephone						
	40 Gasoline/oil						
	41 Repairs and maintenance						
	42 Insurance						
	43 Current taxes						
	44 Other (specify)						
33 Total income	45 Total expenses (Treasury use only)						
	46 Net difference (Treasury use only)						
Certification: Under penalties of perjury, I declare that to the true, correct, and complete.	ne best of my knowledge and belief this statement of assets, li	iabilities, and other information is					
47 Signature		48 Date					
		i					