OMB Approved No.: 2900-0047 Respondent Burden: 45 minutes Expiration Date: XXXXXXXX

M Dan	outmont of Votorono Affaira	FINΔN	ICIAI	STATEME	NT	1. FILE NO.	2. LOA	NN NO.	
	artment of Veterans Affairs					C-		x0.4	
important: co-borrower or	Type or print all entries in ink. If more space i co-applicant who is not the spouse of the borrow	wer/applican	t, a separa	te financial statem	ent sho	uld be completed by that	eparate sheets. person.	If there is a	
2 NAME AND D				TELEPHONE NO.			5. DATE OF BI	DTU	
(Include ZIP Code)			4. HOME	E TELEPHONE NO.	3. DATE OF BIRTH				
			6. MARIT	TAL STATUS OF B	WER/APPLICANT	7. SOCIAL SECURITY NO. OF BORROWER/APPLICANT			
8. NAME OF SP	OUSE		9. SPOUS OF BIF	SE'S DATE RTH		OCIAL SECURITY NO. OF YOUSE	11. AGE(S) OF	DEPENDENT(S)	
	WER/APPLICANT: If you do not wish to 12B and 12C, please initial here	INITIALS		complete Items 131	B and I on not	SPOUSE: If you do not 3C please initial here to be collected on a non-	wish to	INITIALS	
12B. RACE/NAT	TONAL ORIGIN	12C. SEX		13B. RACE/NATIO	NAL OF	RIGIN		13C. SEX	
AMERICAI ALASKA N	MALE	■	AMERICAN IN ALASKA NATI		HISPANIC		MALE		
	BLACK (Not Hispanic)	FEM/	ALE			BLACK (Not His	spanic)	FEMALE	
ASIAN PA				ASIAN PACIFI ISLANDER	C	WHITE (Not His	TE (Not Hispanic)		
BORROWEF SPOUSE NE A. THE SF BORRO	ECK THE APPROPRIATE BOX(ES). IF ONE OF RAPPLICANT'S SPOUSE (OR FORMER SPOUS ED BE FURNISHED. POUSE IS OR WILL BE JOINTLY OBLIGATED WOWER/APPLICANT ON THE LOAN. PORROWER/APPLICANT IS RELYING ON THE SE AS A BASIS FOR REPAYMENT OF THE LOAN	SE IF BOX "C	C. THI LO, D. THI SEI	EKED). IF NO BOX E BORROWER/AP AN IS LOCATED IN E BORROWER/AP PARATE MAINTEN	ES AR PLICAI N A CO PLICAI IANCE		MATION CONCE E PROPERTY SE FATE. DNY, CHILD SU	RNING THE ECURING THE PPORT, OR	
	SECTION II -	EMPLO	YMENT	AND FINAN	CIAL	STATUS			
1:	5. COMPLETE RECORD OF EMPLOYMEN						work back 2 ved	urs)	
A. NAME AND ADDRESS OF EMPLOYER				ES (Month, year)		C. KIND OF JOB	D. WORK		
BORROWER /APPLICANT	(1)	F	ROM	ТО		Mechanic, stenographer,	etc.) TEL	EPHONE NO.	
				PRESENT TIME					
	(2)								
	(1)								
SPOUSE				PRESENT TIME					
	(2)								

16. MONTHLY INCOME Include income from business or property		A. GROSS SALARY (Before payroll		BORROWER/ APPLICANT		SPOUSE			C. OTHER (Specify)		BORROWER/ APPLICANT			SPOUSE	
after	iess or property deduction of nses. (Disclosure of	dedu	ctions)	\$		\$					\$		\$		
child	support, alimony maintenance	B. PEN	SION OR					D. TOTAL MONTHLY							
incon	ne is optional)	COMPE	NSATION	\$		\$ 17 Δ9	SSETS		INCO	ME	\$		\$		
A. CA	ASH IN BANK (Chec	king and sa	vings accoi	unts, building and		17. A	JOLIO	E 8/1	/ING BONDS	Current	valua)				
loan accounts, etc.)			\$			F. SAVING BONDS (Current value)					\$	\$			
В. СА	ASH ON HAND				G.			G. ST	G. STOCKS AND OTHER BONDS (Current value)						
C. FL	JRNITURE AND HO		,						H. REAL ESTATE OWNED (Resale value)						
	D. AUTO	YEAR	Resale value	<i>e)</i> MODEL	- 1.			I. OTI	I. OTHER ASSETS (Itemize)						
	IVIANE	TEAR		WIODEL											
E. TF	RAILERS, BOATS, C.	AMPERS (I	Resale value	e)						J. TOT	AL ASSE	ETS	\$		
					-1	18.	DEBTS	.							
NOTE: DETAILS FOR INSTALLMENT CONTRACTS AND OTHER DEBTS (Show here ALL debts which you are required to pay in regular monthly installments, such as car, television, washing machine, payments to dealers, banks, finance companies, repayment of money borrowed for any purpose, doctor bills, hospital bills, etc. Include any alimony, child support, or separate maintenance obligations you are required to pay. If additional space is needed, use Section VI, or attach separate sheet. Do not include living expenses. If repayment of a debt is not on a monthly basis, write "0" in Column E and describe arrangements to repay in "Remarks")															
ITEM NO.	A. NAME AND ADDRESS OF			B. DATE AND PURPOSE OF DEBT (Include account number, if available)					NPAID ANCE			F. AMOUNT PAST DUE (If any)			
(1)								\$		\$		\$		\$	
(2)															
(3)															
			-	TOTAL				\$		\$		\$		\$	
		SECTI	ON III - (CREDIT REF	ERE	NCES A	ND O	THE	R FINAN	CIAL IN	IFORM.	ATION		1	
SECTION III - CREDIT REFERENCES AND OTHER FINANCIAL INFORMATION 19. NAME AND ADDRESS OF FIRMS OR BANKS WITH WHOM YOU HAVE DONE BUSINESS															
Α.							B.								
C.						D.									
20. IF YOU ARE RENTING				MISES Y							D	TO.			
A. MC	ONTHLY RENTAL		B. U1	FILITIES INCLUD	ED?		C. NAI	ME ANI	ADDRESS	OF PERS	JN OR FIF	RM RENTAL	PAID	10	
				YES NO											
	HAVE YOU EVER B			DATE ADJUDICA	ATED BA	ANKRUPT	22A. I	HAVE Y	OU HAD A G	I LOAN?	2	22B. NAME C	F VA	OFFICE WHERE	
,	ADJUDICATED BAN		1-4-						_	"Yes", con	nnlete	LOAN W	VAS P	PROCESSED	
_ \		'Yes", comp 121B)	iete					ES	INO	res, con m 22B)	приене				

VA FORM 26-6807, XXXX Page 2

SECTION IV - REAL ESTATE OWNED									
(Show ALL real estate owned. Use this sheet to provide items of information for each of your other properties.)	information for one prope	rty. If you own more that o	one property use se	parate blank s	heets to provide the same				
23. ADDRESS OF PROPERTY (Number, street, city, cour	nty, State) 24.	24. PURCHASE PRICE			25. CURRENT MARKET VALUE OF PROPERTY				
	\$			\$					
26. NAME AND ADDRESS OF MORTGAGEE (If mortgag	ged) 27.	27. ORIGINAL AMOUNT OF MORTGAGE		28. UNPAID BALANCE					
	\$			\$					
29. FREQUENCY OF MORTGAGE PAYMENTS (If payme regular amortization plan, explain in Section VI, "Rea	ent is not by 30.	AMOUNT OF MORTGAGE PAYMENT	31. STATUS OF L		32. AMOUNT OF DELINQUENCY (If any)				
MONTHLY QUARTERLY SEMI-ANNUALLY			DELINQUEN	Г	\$				
33. OTHER LIENS AGAINST PROPERTY, IF ANY	34.	DO YOU OCCUPY THE PR	OPERTY?						
\$		YES NO							
35. IF PROPERTY IS RENTED, WHAT ARE THE RENTAL	TERMS? 36.	AMOUNT OF AVERAGE M IN EXCESS OF OPERATIN	ONTHLY INCOME ' G EXPENSES	YOU RECEIVE	FROM THIS PROPERTY				
\$ PER	\$								
		DDITIONAL DATA							
37. NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU (Including telephone number if available)									
	SECTION V	I - REMARKS							
PREVIOUS ITEMS. INDICATE ITEM NUMBER TO WHICH YOUR COMMENTS APPLY.									
SECTION VII - CERTIFICATIONS									
I (WE) AFFIRM THAT the information contained he IMPORTANT: If you are certifying that you are married resided at the time of marriage, or where you and/or your 103(c)). Additional guidance on when VA recognizes ma	d for the purpose of VA be spouse resided when you	nefits, your marriage must filed your claim (or a later	be recognized by to date when you bec	he place where					
39A. SIGNATURE OF BORROWER/APPLICANT (Sign in ink)	39B. DATE	40A. SIGNATURE OF SF	POUSE (Sign in ink)		40B. DATE				
PENALTY : The law provides severe penalties which include fine or imprisonment, or both, for the willful submission of a statement or evidence of a material fact, knowing it to be false.									

VA FORM 26-6807, XXXX Page 3

Privacy Act Notice: VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., to service your loan and to evaluate your application for release of liability and, if applicable, substitution of entitlement) as identified in the VA system of records, 55VA26, Loan Guaranty Home, Condominium and Manufactured Home Loan Applicant Records, Specially Adapted Housing Applicant Records, and Vendee Loan Applicant Records - VA, published in the Federal Register. Your obligation to respond is required to obtain or retain benefits. Giving us your SSN account information is voluntary. Refusal to provide your SSN by itself will not result in the denial of benefits. VA will not deny an individual benefits for refusing to provide his or her SSN unless the disclosure of the SSN is required by a Federal Statute of law in effect prior to January 1, 1975, and still in effect.

Respondent Burden: We need this information to service your loan and to evaluate your application for release of liability and, if applicable, substitution of entitlement. Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 45 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at www.reginfo.gov/public/do/PRAMain. If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

NOTICE TO APPLICANTS

This is notice to you as required by the Right to Financial Privacy Act of 1978 that the Department of Veterans Affairs Loan Guaranty Service or Division has a right of access to financial records held by a financial institution in connection with the consideration or administration of assistance to you. Financial records involving your transaction will be available to the Department of Veterans Affairs Loan Guaranty Service or Division without further notice or authorization but will not be disclosed or released to another Government Agency or Department without your consent except as required or permitted by law.

VOLUNTARY INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The information in Items 12A, 12B, 12C, and 13A, 13B, and 13C is requested by the Federal Government to monitor compliance by VA as a lender with Equal Credit Opportunity and Fair Housing laws. The law provides that a lender may neither discriminate on the basis of this information nor on whether or not it is furnished.

VA FORM 26-6807, XXXX Page 4