



Farmers & Merchants Bank of Colby

AGRICULTURAL BALANCE SHEET

240 W. 4th St. • P.O. 797 • Colby, KS 67701 • (785) 460-3321 • (785) 460-9727 Fax

Name(s):	SSN or Tax ID No.:	Date:
Residence Address:		Telephone Number:

GENERAL INFORMATION

Ownership of Assets/Liabilities listed below

Individual: Joint
 Corp: Partnership

- | | | | |
|---|------------------------------|-------------------------------|--|
| Are any of these assets held in a revocable Trust? | No: <input type="checkbox"/> | Yes: <input type="checkbox"/> | If yes, please explain on an attached paper. |
| Are (either of) you currently a defendant in any legal actions? | No: <input type="checkbox"/> | Yes: <input type="checkbox"/> | If yes, please explain on an attached paper. |
| Are there any disputed tax claims against (either of) you? | No: <input type="checkbox"/> | Yes: <input type="checkbox"/> | If yes, please explain on an attached paper. |
| Are you a partner or officer in any other venture? | No: <input type="checkbox"/> | Yes: <input type="checkbox"/> | If yes, please explain on an attached paper. |
| Do you have any contingent liabilities? | No: <input type="checkbox"/> | Yes: <input type="checkbox"/> | If yes, please explain on an attached paper. |
| Do you have crop insurance (either Multi-Peril or Hail)? | No: <input type="checkbox"/> | Yes: <input type="checkbox"/> | If yes, please explain on an attached paper. |
| Do you have hazard insurance on farm assets? | No: <input type="checkbox"/> | Yes: <input type="checkbox"/> | If yes, please explain on an attached paper. |
| Do you have disability insurance? | No: <input type="checkbox"/> | Yes: <input type="checkbox"/> | If yes, please explain on an attached paper. |
| Do you rent or lease any farm ground? | No: <input type="checkbox"/> | Yes: <input type="checkbox"/> | If yes, please explain on an attached paper. |

PERSONAL INFORMATION: (Completion of this section is optional)

Age: _____	Number of Dependents: _____	
Approximate Date of Will _____	Name of Attorney: _____	
	Name of Accountant: _____	

LISTING OF ASSETS AND LIABILITIES AS OF

Fill all blanks in the following balance sheet, clearly indicate if a space is not applicable

ASSETS		LIABILITIES	
Cash (Including Checking Accounts)		Accounts Payable (Including Credit Cards Sch. N)	
Savings & Investments (Schedule A)		Notes Due Within 1 Year (Schedule N)	
Accounts Receivable (Schedule B)		Current Portion of Long-Term Debt (Schedule O)	
Feed & Grain Held for Sale (Schedule C)		Accrued Interest (Schedules N & O)	
Feed & Grain To Be Fed to Livestock (Schedule C)		Income Taxes Payable	
Livestock for Sale (Schedule D)		Other Accrued Expenses	
Prepaid Expenses		Current Portion - Personal Liabilities (Schedule O)	
Cash Investment in Growing Crops (Schedule F)		Other Current Liabilities:	
Crop Insurance			
Other Current Assets			
TOTAL CURRENT ASSETS		TOTAL CURRENT LIABILITIES	
Breeding Livestock (Schedule E)		Long-Term Portion - F&M Equip. Debt (Sch. O)	
Vehicles, Machinery & Equipment (Schedule G)		Long-Term Portion - Other M&E Debt (Sch. O)	
Farm Real Estate (Schedule H)		Long-Term Portion - F&M R/E Debt (Sch. O)	
Real Estate with Buildings & Improvements (Sch. H)		Long-Term Portion-Other Real Estate Debt (Sch. O)	
Inventory		Long-Term Portion Other Farm Debt (Sch. O)	
Investments in Other Entities		Long-Term Portion - Personal Liabilities (Sch. O)	
Investments in Cooperatives		Deferred Taxes	
IRA, 401k, Keough, etc.		Other Long-Term Liabilities	
Cash Value Life Insurance (Face Amount \$ _____)			
Other Personal Property			
Other Assets		TOTAL LONG-TERM LIABILITIES	
		TOTAL LIABILITIES	
TOTAL NON-CURRENT ASSETS:		NET WORTH	
TOTAL ASSETS		TOTAL LIABILITIES & NET WORTH	

SCHEDULE A SAVINGS & INVESTMENTS

Type of Account or Description Of Security (Name of Co./Issue, etc)	Depository or Institution	Cost Basis	Account # or No. of Shares	Maturity Date	Current Value
TOTALS					

SCHEDULE B ACCOUNTS RECEIVABLE (ASCS Payments, CRP, Grain/Cattle sold on contract)

Description of Accounts Receivable	Maturity Date	Current Value
TOTALS		

SCHEDULE C FEED & GRAIN HELD FOR SALE (attach additional sheet if necessary)

Description	Storage Site (Farm, Bonded Elevator, etc.)	Units (bu., tons, etc)	Quantity	Market Price/Unit	Total Value
TOTALS					

SCHEDULE D LIVESTOCK FOR SALE (Do not include breeding livestock) (attach additional sheet if necessary)

Description	Sex	Percent of Ownership	Average Weight/Hd	Quantity	Market Value Price/Cwt	Total Market Value
TOTALS						

SCHEDULE E BREEDING LIVESTOCK (attach additional sheet if necessary)

Description	Age	Quantity	Cost Basis	Accumulated Depreciation	Market Price/Hd	Total Market Value
TOTALS						

SCHEDULE F CASH INVESTMENT IN GROWING CROPS (attach additional sheet if necessary)

Crop Description/Location	# of Acres	Your Share	Current Investment	Estimated Yield	Estimated Sale Value	Insured Value
TOTALS						

SCHEDULE N CURRENT LIABILITIES (Accounts Payable, Notes Due within 1 year, etc)

Payable To	Collateral	Current Balance	Accrued Interest	Interest Rate	Payment Terms
		TOTALS			

SCHEDULE O LONG-TERM LIABILITIES (Notes Payable with maturities greater than 1 year)

Payable To	Collateral	Current Balance	Principal Due Within 1 yr.	Prin. Due >1 year	Accrued Interest	Interest Rate	Payment Terms	Annual Payment
		TOTALS						

For the purpose of obtaining loans and otherwise procuring and maintaining credit from Farmers & Merchants Bank of Colby on behalf of the undersigned, or other persons, firms or corporations on whose behalf the undersigned, either severally or jointly with others, are executing a guaranty in your favor, the undersigned furnishes to Farmers & Merchants Bank of Colby this statement of the undersigned's financial condition as of _____, 20____. F&M Bank is authorized to make all inquiries deemed necessary to verify the accuracy of the statements made herein, and F&M Bank is authorized to report to others on F&M Bank's credit experience with the undersigned. As long as all obligations, including a guaranty, by the undersigned to F&M Bank is outstanding, the undersigned shall supply annually an updated financial statement. By my (our) signature(s), it is represented that I (we) have read all pages of this Financial Statement, that the information contained herein is true and correct, and that it constitutes a true and accurate account and statement of my (our) financial condition as of the date thereof, and a true and accurate account of my (our) financial capacity during the period indicated herein; and that I (we) will immediately notify F&M Bank in writing of any material unfavorable change in my (our) financial condition or in the facts stated herein. **Each of the undersigned represents, warrants and certifies that none of the above assets are held in trust, and will notify you immediately if any of the above assets are transferred to a trust.**

Date: _____ Signature _____

SSN: _____

Date: _____ Signature _____

SSN: _____