

Small Business Administration Loan Program

Why choose an SBA loan? Less money down. Longer payback terms. No refinancing fees or hidden points.

Will your business qualify for an SBA loan? Nearly all businesses qualify for eligibility in the SBA loan program, including start-up businesses and franchises.

Is there any difference in SBA lenders? An experienced SBA lender can save you weeks – even months – in the loan application and approval process.

Why choose First Community Bank's SBA Lending team? Our combined SBA lending experience totals over 50 years. Before you complete this package, call us. In most cases, we can tell you during the phone interview whether you would qualify, based on available information.

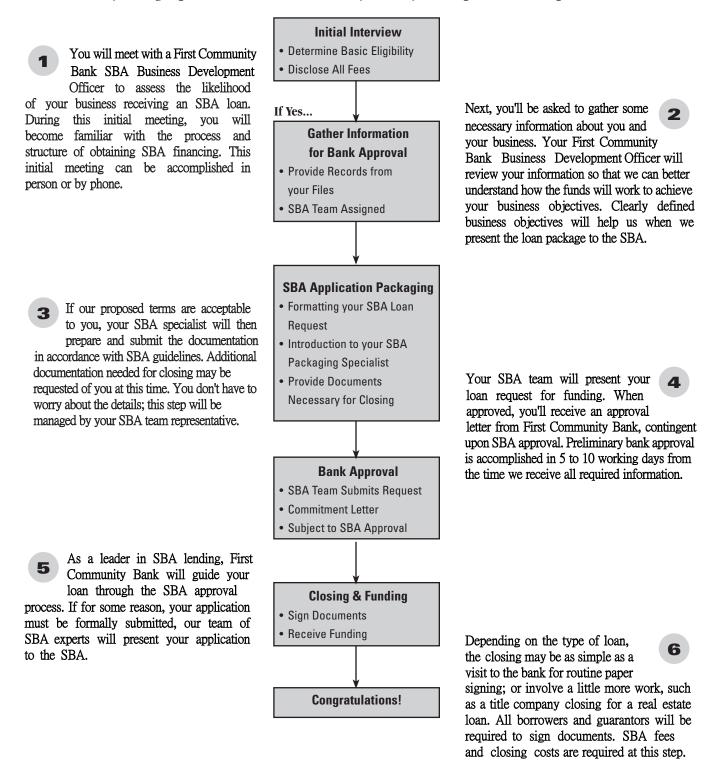
> It's easy to get started. Contact us today for a no-cost, no-risk assessment.

(361) 882-9310 • SBAadmin@fcbot.com



First Community Bank's SBA Loan Process

These are six basic steps in receiving an SBA loan from First Community Bank. With the exception of getting final approval from the SBA, the process is virtually identical to that of any other business loan you might pursue. In some cases, it may actually be simpler. These steps are:



You've just completed an important milestone for your business!



Loan Proposal Checklist

The SBA's loan programs can be your solution to long term financing for a variety of business purposes. In order to complete our analysis of your loan request and structure a financing package that meets your company's needs, we will need to review certain information, as itemized below. **Please note that all items must contain an original signature and date.** For each box checked below, please provide the requested information.

I. SBA Forms

First Community Bank Application for SBA Business Loan, including the enclosed Management Profile and Business Profile, completed by each Owner, Partner holding 20% or more of the Common Stock and/or key management personnel.

II. Business Financial Exhibits

□ Fiscal year end business financial statements for prior three (3) years

- Business federal tax returns for prior three years, to include all supporting schedules and statements
- □ Interim business financial statements (year-to-date) within 30 days of application date
- Contingent liability information business (form enclosed)
- Additional for Start-Ups:
 - Business Plan (for new business)
 - Month-to-month projections covering two full fiscal years, including the assumptions that the projections were based upon and a pro forma business balance sheet

III. Personal Financial Exhibits

- To be completed by each Owner, Partner, holder of 20% or more common stock and/or key management.
- Personal Financial Statement (form enclosed) for all owner(s) with 20% or more ownership interest
- Personal Cash Flow Statement (form enclosed)
- Personal Federal Tax returns for prior three years, to include all supporting schedules and statements
- SBA Borrower Information Form (Form 1919 enclosed)
- Signed Authorization for Credit History (form enclosed)

IV. Miscellaneous (as applicable)

- □ Executed or Certified Copy of Buy/Sell Agreement
- Copy of Franchise Agreement and Offering Circular
- Copy of lease or proposed lease on Facility to be occupied
- Copy of Fixed Price Contract for work to be done by Contractor, Construction Budget/Plans and Specifications
- Copy of Real Estate Purchase Agreement
- Legal Entity Documents:
 - Sole Proprietorship Fictitious Name Statement or Assumed Name Certificate
 - Corporation Articles of Incorporation and Bylaws and Assumed Name Certificate
 - Partnerships (General or Limited) Partnership Agreements (with all exhibits)
 - Limited Liability Company Articles of Organization Form (LLC-1), Operating Agreement, and Assumed Name Certificate
 - Trust Trust Agreement with all exhibits and amendments
- Description of Collateral
- Copy of Driver's License

Other_



SBA Loan Application

	Date Established	Tax I.D
	Tel	Fax
	E-mail	
		Business Structure
Before Loan	After Loan	Corporation Partnership LLC Sole Prop.
	Before Loan	Tel

Current Bank and Address _____

Capital Required Source of Cash/Equity Injection **SOURCE** VERIFICATION AMOUNT \$ Land Acquisition \$ _____ Checking/Savings - Personal **Bank Statements** New Building Construction \$____ \$ _____ □ Checking/Savings - Business **Bank Statements** □ 10% Contingency (hard cost) \$_____ Land Equity Appraisal, Purchase \$_____ Land and Building Acquisition \$ Agreement \$_____ Building Improvements or Repairs □ Retirement/401K **Account Statements** Leasehold Improvements \$ \$ (See Note 1) □ Machinery & Equipment \$_____ Early Inheritance Inheritance Letter \$ _____ \$_____ □ Furniture & Fixtures Home Equity Appraisal, Account \$ Statements Inventory Purchase \$ \$ _____ \$_____ Monies Already Invested Receipts, Paid Invoices Acquisition of Existing Business Gift Letter Tax Returns and F/S of \$_____ Refinance Existing Bank Loan Gift Grantor \$ _____ Other Debt Repayment \$ \$ □ Sale of Assets Documents Working Capital \$__ Other* (Specify Below) \$_____ **Closing Costs** \$____ TOTAL EQUITY INJECTION \$ ____ Other \$ Note 1: This sum is derived from 401K Loans, IRA and Brokerage accounts. Interim Interest \$ Other*: Loans provided by family members and friends. Pre-opening Expenses Attorney \$ \$ \$_____ Architect Other \$ TOTAL \$ S **TOTAL CAPITAL REQUIRED** s () **TOTAL EQUITY INJECTION** S LOAN AMOUNT REQUESTED



SBA Loan Application, Continued

List any previous SBA or other Federal Government Debt.

NAME OF AGENT	ORIGINAL AMOUNT OF LOAN	DATE OF Request	DATE APPROVED OR DECLINED	BALANCE	CURRENT OR PAST DUE

ASSISTANCE List the name and occupation of anyone who assisted in the preparation of this form.

Name	Fees Paid \$

Occupation ____

MANAGEMENT Proprietor, partners, officers, directors, and all holders of outstanding stock - 100% of ownership must be shown.

NAME	TITLE	E-MAIL	% OWNERSHIP

AFFILIATES List below any business concern in which the applicant company or any of the individuals listed above have any ownership.

BUSINESS NAME	OWNER'S NAME	% OV	VNERSHI	2
			YES*	NO
Have you or any officer of your company ever been involved in bankrup	tcy or insolvency proceedings?		•	
Are you or your business involved in any pending judgments?		•		
Are there any outstanding tax liens or judgements filed against you or your company?				
Does any applicant or their spouse or any member of their household business or their spouses or members of their household work for the				
Advisory Council, SCORE or ACE, or any Federal Agency, or the participating lender?				
Does your business presently, or as a result of this loan, engage in export trade?				
Does your company or any owner own title to a patented, trademarked, or copyrighted product?				
Does your company maintain Life Insurance on any owner or officer?				
Insured Benefici	nsured Beneficiary			
Insured Beneficiary				

Date_____ Your Signature _____



Management Profile

Who Needs to Complet					
Proprietor, each partne	r, holder of 20% or more of	common stock, and/or	key management.		
Vame			Birth Date	I	Birth Place
J.S. Citizen? 🗅 YES	□ N0 If No, give Alien R	egistration No.		and c	opy of Alien Registration Car
łome Telephone			Social Security Nur	nber	
Present Residence	From _		То		
Address					
City, State, County, Zip_					
mmediate Past Reside	nce From _		То		
Address					
City, State, County, Zip_					
Ethnic Background					
African American	Native American	Eskimo/Aleutian	Asian/Pacific	Islander 🗆 V	Vhite 🗅 Other
lispanic Origin?	🗅 Yes	🗅 No	🗅 Puerto Rican		
Military Status	From		То		Branch
	Vietnam Era Vet or statistical purposes only	□ Non-Vet □ γ. It has no bearing on th		-	Honorable? e application.)
Education History	(if not attached)				
nstitution					
Dates			Degree		
nstitution					
Dates			Degree		
nstitution					
Dates			Degree		



Management Profile, Continued

Employment Experience for prior 10 Years (if not attached)

		Position	
Responsibilities			
2. Employer / Location			
		Position	
Responsibilities			
3. Employer / Location			
From	To	Position	
Responsibilities			
4. Employer / Location			
		Position	
Responsibilities			
5. Employer / Location			
 From	To	Position	
Responsibilities			
6. Employer / Location			
 From	To	Position	
Responsibilities			

Date_____ Your Signature _____



Business Profile (If not attached)

Please give a brief history, including the year founded, by whom, products or services provided, and where the business is located.

Who are your major customers?

Name	Location	Percent (%) of Sales
Who are your major suppliers?		
Name	Location	Product Purchased
Who are your major competitors?		
Name	Location	Competing Product

How will the SBA Loan change or aid the growth of the business?

By signing below you certify that the information you've given with this Application is true and complete. You authorize us to verify your statements with any source and obtain credit and employment history (including your spouse's if you live in a community property state).

Date

Your Signature ____



PERSONAL FINANCIAL STATEMENT 7(a) / 504 LOANS AND SURETY BONDS

	/(a) / 504 LUANS A	IND SURELY BONDS	
U.S. SMALL BUSINESS ADMINISTRATION	As of	,	
SBA uses the information required by this Form 413 as one SBA guaranteed 7(a) or 504 loan or a guaranteed surety.	of a number of data sources in an	alyzing the repayment ability and creditworthiness of an application for an	
Complete this form for: (1) each proprietor; (2) general part the Applicant (including the assets of the owner's spouse a		ted liability company (LLC); (4) each owner of 20% or more of the equity of person providing a guaranty on the loan	
Return completed form to: For 7(a) loans: the lender processing the application for S For 504 loans: the Certified Development Company (CDC For Surety Bonds: the Surety Company or Agent process) processing the application for SB		
Name		Business Phone	
Home Address		Home Phone	
City, State, & Zip Code			
Business Name of Applicant			
ASSETS	(Omit Cents)	LIABILITIES (Omit Cents)	
Cash on Hand & in banks Savings Accounts IRA or Other Retirement Account (Describe in Section 5) Accounts & Notes Receivable (Describe in Section 5) Life Insurance – Cash Surrender Value Only (Describe in Section 8) Stocks and Bonds (Describe in Section 3) Real Estate (Describe in Section 4) Automobiles (Describe in Section 5, and include Year/Make/Model) Other Personal Property (Describe in Section 5) Other Assets (Describe in Section 5)	\$ \$ \$ \$ \$ \$ \$	Accounts Payable	
Section 1. Source of Income.		Contingent Liabilities	
Salary Net Investment Income Real Estate Income Other Income (Describe below)*	\$ \$	As Endorser or Co-Maker\$	
Description of Other Income in Section 1.			
*Alimony or child support payments should not be disclosed in "Other In	ncome" unless it is desired to have su	ch payments counted toward total income.	

Names and Add Noteholde		of	Original Balance	Current Balance	Payment Amount	Frequ (monthl			red or Endorsed of Collateral
Section 3. Stocks an	d Bond	ls. (Use a	attachments if nec	essary. Each at	tachment must be	identified as pa	art of this stat	ement and signe	d.)
Number of Shares	N	ame of s	Securities	Cost		t Value /Exchange		ate of n/Exchange	Total Value
ection 4. Real Estate	e Owne	d. (List e	ach parcel separa	ately. Use attach	ment if necessary	. Each attachn	nent must be	identified as a pa	art of this statement
			Property	Α	Property B			Property C	
Type of Real Estate (e Primary Residence, Of Residence, Rental Pro Land, etc.)	her								
Address									
Date Purchased									
Original Cost									
Present Market Value									
Name & Address of Mortgage Holder									
Mortgage Account Nur	nber								
Mortgage Balance									
Amount of Payment pe Month/Year	er								
Status of Mortgage									
Section 5. Other Person of lien,							s security, s	state name an	d address of lien
······						/			
Section 6. Unpaid T ien attaches.)	axes.	(Descrit	oe in detail as	to type, to w	nom payable, v	when due, a	mount, and	d to what pro	perty, if any, a ta

10

Section 8. Life Insurance Held. Beneficiaries.)	(Give face amount and cash surrender value of policies – name of insurance company and

I authorize the SBA/Lender/Surety Company to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness.

<u>CERTIFICATION</u>: (to be completed by each person submitting the information requested on this form)

By signing this form, I certify under penalty of criminal prosecution that all information on this form and any additional supporting information submitted with this form is true and complete to the best of my knowledge. I understand that SBA or its participating Lenders or Certified Development Companies or Surety Companies will rely on this information when making decisions regarding an application for a loan or a surety bond. I further certify that I have read the attached statements required by law and executive order.

Signature	Date
Print Name	Social Security No.
Signature	Date
Print Name	Social Security No.

NOTICE TO LOAN AND SURETY BOND APPLICANTS: CRIMINAL PENALITIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant civil penalties, and a denial of your loan or surety bond application. A false statement is punishable under 18 U.S.C. §§ 1001 and 3571 by imprisonment of not more than five years and/or a fine of up to \$250,000; under 15 U.S.C. § 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a Federally-insured institution, a false statement is punishable under 18 U.S.C. § 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000. Additionally, false statements can lead to treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729, and other administrative remedies including suspension and debarment.

PLEASE NOTE: The estimated average burden hours for the completion of this form is 1.5 hours per response. If you have questions or comments concerning this estimate or any other aspect of this information, please contact Chief, Administrative Branch, U.S. Small Business Administration, Washington, D.C. 20416, and Clearance officer, paper Reduction Project (3245-0188), Office of Management and Budget, Washington, D.C. 20503. PLEASE DO NOT SEND FORMS TO OMB.



Personal Cash Flow Summary

INCOME		ANNUAL AMOUNT
Available Draw		\$
🖵 Gross Salary	Principal	\$
🖵 Gross Salary	Spouse	\$
Rental Income Received	Gross	\$
Interest/Investment Income	Recurring	\$
Other Income	Recurring	\$
Other* (Specify Below)		\$
	TOTAL INCOME	\$
EXPENSES		
Mortgage Expense	P&I	\$
Rental Mortgage Expense	P&I	\$
Rental Repairs & Maintenance	All	\$
Auto Loans	All	\$
Installment Loans	All	\$
Revolving Loans (Credit Cards)	5% of Monthly Balances Annualized	\$
Living Expenses	Estimate	\$
🗅 Income Taxes	Historical Rate	\$
Property Taxes	Historical Rate	\$
Alimony/Child Support*	If Applicable	\$
🗅 Child Care	If Applicable	\$
🗅 Health Insurance	If Applicable	\$
Life Insurance	If Applicable	\$
Auto Insurance	If Applicable	\$
Miscellaneous	Typical Range is 5% - 10% of Total Income	\$
	TOTAL EXPENSES	\$
Net Discretionary Income		\$
Coverage Ratio	Income/Expense	

*Alimony or child support payments need not be disclosed unless it is desired to have such payment count toward total income.

Date_____



FIRST COMMUNITY BANK 500 North Water Street, Suite 100 Corpus Christi, TX 78401 (361) 882-9310 Member FDIC

AUTHORIZATION FOR INVESTIGATION OF CHARACTER AND CREDIT HISTORY

The undersigned is requesting that First Community Bank extend or consider extending or continue the extension of credit to the undersigned or to others upon the guarantee of the undersigned. The undersigned acknowledge and understand that First Community Bank is relying on information provided and obtained in deciding to grant or continue credit or to accept a guarantee thereof. The undersigned hereby authorizes First Community Bank, its agents, associates, etc. to verify the accuracy of all information provided and to determine the credit-worthiness of the undersigned. The undersigned agree to reimburse First Community Bank for any and all expenses incurred in the consideration, making and/or administration of any and all loans or other extensions of credit related hereto. The undersigned authorizes any consumer, commercial or credit reporting agency, creditor, employer, reference or any other person or entity to give First Community Bank, its agents, associates, etc. any information it may have on the undersigned. The undersigned further authorizes First Community Bank to share all information as may be required with participants or other lenders. This statement and other information that the undersigned furnish to First Community Bank or that First Community Bank obtains hereinafter related shall be First Community Bank property whether credit is extended or not.

NAME:

First	Middle		Last	
Address		City	State	Zip
Social Security No			Date of Birth	
Signature			Date	
Phone No	E-mail			
PLEASE COMPLETE FOR JOINT REQUEST	ГS:			
First	Middle		Last	
Address		City	State	Zip
Social Security No			Date of Birth	
Signature			Date	
Phone No	E-mail			



Business Debt Schedule Applicant Business

Company Name _____]

Date _____ Signature _____

INDEBTEDNESS Furnish the following information on all installment debts, contracts, notes, and mortgages payable. Indicate by placing an asterisk (*) on items to be paid by loan proceeds and reason for paying same (present balance should agree with latest balance sheet submitted). Do not include accounts payable or accrued liabilities.

CREDITOR Name and Address	Original Date	Original Amount	Present Balance	Interest Rate	Monthly Payment	Maturity Date	Collateral/Security
	Total Pres	ent Balance					



Contingent Liability Information - Business

_ _

_ _

Name of Borrower or Guarantor:	CIF #

Debts or obligations of other companies, partnerships, or individuals on which

you are personally liable (if none, please write none in the space provided):_____

NAME	LENDER	AMOUNT OF DEBT	AMOUNT OF YOUR PERSONAL OBLIGATION	MONTHLY PAYMENT
		_ \$	\$	\$
		_ \$	\$	\$
		_ \$	\$	\$
		_ \$	\$	\$
		_ \$	\$	\$
		_ \$	\$	\$

_ _

List claims or other contingencies, which may require cash for you (please explain):

_ _

This cash flow and contingent liability statement is part of the financial statement dated ______.

The undersigned certifies this information to be true and correct.

Printed Name

Signature

_ __

Date

_ _

- -



Business Debt Schedule Affiliate Business

Company Name _____ Date _____ Signature _____

INDEBTEDNESS Furnish the following information on all installment debts, contracts, notes, and mortgages payable. Indicate by placing an asterisk (*) on items to be paid by loan proceeds and reason for paying same (present balance should agree with latest balance sheet submitted). Do not include accounts payable or accrued liabilities.

CREDITOR Name and Address	Original Date	Original Amount	Present Balance	Interest Rate	Monthly Payment	Maturity Date	Collateral/Security
	Total Pres	ent Balance					



Projected Profit/Loss

Applicant Name			Date					Period Covering						
	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12	12 Month Total	YEAR TWO
Total Net Sales														
Cost of Goods Sold														
Gross Profit														
Controllable Expenses														
Salaries/Wages														
Payroll Taxes														
Officer's Salary														
Legal/Accounting														
Advertising														
Automobile														
Office Supplies														
Dues/Subscriptions														
Telephone														
Utilities														
Miscellaneous														
Total Controllable														
Expenses														
Fixed Expenses														
Rent														
Taxes														
Licenses/Permits														
Other Expenses														
Interest														
Total Fixed Expenses														
Total Expenses														
Profit/(Loss) before Tax														
Income Tax														
NET PROFIT														

Request for Transcript of Tax Return

Do not sign this form unless all applicable lines have been completed.

Request may be rejected if the form is incomplete or illegible.



For more information about Form 4506-T, visit www.irs.gov/form4506t.

Tip. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946. If you need a copy of your return, use Form 4506, Request for Copy of Tax Return. There is a fee to get a copy of your return.

1a Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)				
2a If a joint return, enter spouse's name shown on tax return.	2b Second social security number or individual taxpayer identification number if joint tax return				
3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)					

4 Previous address shown on the last return filed if different from line 3 (see instructions)

5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number.

First Community Bank, 500 North Water Street, Suite 100, Corpus Christi, TX 78401

Caution: If the tax transcript is being mailed to a third party, ensure that you have filled in lines 6 through 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy. Once the IRS discloses your tax transcript to the third party listed on line 5, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party.

- 6 Transcript requested. Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request.
- Return Transcript, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made а to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120-A, Form 1120-H, Form 1120-L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days
- b Account Transcript, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 10 business days
- С Record of Account, which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 10 business days
- 7 Verification of Nonfiling, which is proof from the IRS that you did not file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days
- Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript. The IRS can provide a transcript that includes data from these 8 information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2011, filed in 2012, will likely not be available from the IRS until 2013. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 10 business days

Caution: If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

9	Year or period requ	ested. E	nter the e	ending	date of t	he ye	ar or peric	d, using	the	mm/dd/yyy	/y foi	mat. If yo	u are r	requ	esting	more	than	four y	ears or
	periods, you must			Form	4506-T.	For	requests	relating	to	quarterly	tax	returns,	such	as	Form	941,	you	must	enter
	each quarter or tax pe	eriod sep	arately.		/	/		/		/		/	/				/	/	

Caution: Do not sign this form unless all applicable lines have been completed.

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, at least one spouse must sign. If signed by a corporate officer, 1 percent or more shareholder, partner, managing member, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. Note: For transcripts being sent to a third party, this form must be received within 120 days of the signature date.

		y attests that he/she has read the attestation clause and upon so readi authority to sign the Form 4506-T. See instructions.	Phone number of taxpayer on line 1a or 2a	
	►	Signature (see instructions)	Date	
Sign Here	►	Title (if line 1a above is a corporation, partnership, estate, or trust)		
	►	Spouse's signature	Date	
	201	at and Banamuark Baduction Act Natica can have 2		Earm 4506-T (Poy. 0.2015)

For Privacy Act and Paperwork Reduction Act Notice, see page 2.

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Section references are to the Internal Revenue Code unless otherwise noted.

Future Developments

For the latest information about Form 4506-T and its instructions, go to www.irs.gov/form4506t. Information about any recent developments affecting Form 4506-T (such as legislation enacted after we released it) will be posted on that page.

General Instructions

Caution: Do not sign this form unless all applicable lines have been completed.

Purpose of form. Use Form 4506-T to request tax return information. You can also designate (on line 5) a third party to receive the information. Taxpayers using a tax year beginning in one calendar year and ending in the following year (fiscal tax year) must file Form 4506-T to request a return transcript.

Note: If you are unsure of which type of transcript you need, request the Record of Account, as it provides the most detailed information.

Tip. Use Form 4506, Request for Copy of Tax Return, to request copies of tax returns.

Automated transcript request. You can quickly request transcripts by using our automated

self-help service tools. Please visit us at IRS.gov and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946

Where to file. Mail or fax Form 4506-T to the address below for the state you lived in, or the state your business was in, when that return was filed. There are two address charts: one for individual transcripts (Form 1040 series and Form W-2) and one for all other transcripts.

If you are requesting more than one transcript or other product and the chart below shows two different addresses, send your request to the address based on the address of your most recent return.

Chart for individual transcripts (Form 1040 series and Form W-2 and Form 1099)

If you filed an individual return and Mail or fax to: lived in:

Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address	Internal Revenue Service RAIVS Team Stop 6716 AUSC Austin, TX 73301 512-460-2272
Alaska, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming	Internal Revenue Service RAIVS Team Stop 37106 Fresno, CA 93888 559-456-7227
Connecticut, Delaware, District of Columbia, Florida, Georgia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia	Internal Revenue Service RAIVS Team Stop 6705 P-6 Kansas City, MO 64999 816-292-6102

Chart for all other transcripts

If you lived in or your business was in:	Mail or fax to:
Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minsoota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, a foreign country, American	Internal Revenue Service RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409
Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P. O. address	801-620-6922

Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Internal Revenue Service Kentucky, Maine, **RAIVS** Team Marvland, P.O. Box 145500 Massachusetts. Stop 2800 F Michigan, New Cincinnati, OH 45250 Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West 859-669-3592 Virginia, Wisconsin

Line 1b. Enter your employer identification number (EIN) if your request relates to a business return. Otherwise, enter the first social security number (SSN) or your individual taxpayer identification number (ITIN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

Line 3. Enter your current address. If you use a P.O. box, include it on this line.

Line 4. Enter the address shown on the last return filed if different from the address entered on line 3.

Note: If the addresses on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address. For a business address, file Form 8822-B, Change of Address or Responsible Party — Business.

Line 6. Enter only one tax form number per request.

Signature and date. Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a. If you completed line 5 requesting the information be sent to a third party, the IRS must receive Form 4506-T within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines are completed before signing.



You must check the box in the signature area to acknowledge you have the authority to sign and request the information. The form will not be processed and returned to you if

Individuals. Transcripts of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506-T exactly as your name appeared on the original return. If you changed your name, also sign your current name.

Corporations. Generally, Form 4506-T can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer. A bona fide shareholder of record owning 1 percent or more of the outstanding stock of the corporation may submit a Form 4506-T but must provide documentation to support the requester's right to receive the information.

Partnerships. Generally, Form 4506-T can be signed by any person who was a member of the partnership during any part of the tax period requested on line 9.

All others. See section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

Note: If you are Heir at law, Next of kin, or Beneficiary you must be able to establish a material interest in the estate or trust.

Documentation. For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the letters testamentary authorizing an individual to act for an estate.

Signature by a representative. A representative can sign Form 4506-T for a taxpayer only if the taxpayer has specifically delegated this authority to the representative on Form 2848, line 5. The representative must attach Form 2848 showing the delegation to Form 4506-T.

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. You are not required to request any transcript; if you do request a transcript, sections 6103 and 6109 and their regulations require you to provide this information, including your SSN or EIN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506-T will vary depending on individual circumstances. The estimated average time is: Learning about the law or the form, 10 min.; Preparing the form, 12 min.; and Copying, assembling, and sending the form to the IRS, 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-T simpler, we would be happy to hear from you. You can write to:

Internal Revenue Service	Tax Forms
and Publications Division	1111
Constitution Ave. NW, IR-6526	Washington, DC
20224	

Do not send the form to this address. Instead, see Where to file on this page.



BORROWER INFORMATION FORM For use with all 7(a) Programs

The purpose of this form is to collect identifying information about the applicant, loan request, indebtedness, information about the principals, information about current or previous government financing, and certain other disclosures. The information also facilitates background checks as authorized by Section 7(a)(1)(B) of the Small Business Act, 15 U.S.C. 636(a)(1)(B). This form is to be completed by the Small Business Applicant and submitted to an SBA Participating Lender.

To be completed by the following:

(With the exception of guarantors, all parties listed below are considered "Associates" of the small business applicant.)

- For a sole proprietorship, the sole proprietor;
- For a partnership, all general partners and all limited partners owning 20% or more of the equity of the firm; •
- For a corporation, all owners of 20% or more of the corporation and each officer and director;
- For limited liability companies (LLCs), all members owning 20% or more of the company, each officer, • director, and managing member;
- Any person hired by the business to manage day-to-day operations; and
- Any other person who is guaranteeing the loan, if required by SBA.

For clarification regarding any of the questions, you should contact the SBA Participating Lender that will be processing the loan request.

NAME OF BUSINESS APPLYING FOR LOAN ("APPLICANT"): _____

YOUR NAME:	TITLE:

SOCIAL SECURITY NUMBER:

DATE OF BIRTH:

PLACE OF BIRTH (City & State or Foreign Country): _____

Veteran**	1=Non-Vete	1=Non-Veteran; 2=Veteran-Other; 3=Service-Disabled Veteran; 4=Not Disclosed.					
Gender**	M=Male; F=Female; N=Not Disclosed						
Race**		n Indian or Alas White; X=Not		2=Asian; 3	=Black	or African-A	American; 4=Native Hawaiian or Pacific
Ethnicity**	H=Hispanic or Latino; N=Not Hispanic or Latino; Y=Not Disclosed						
Owner		% Owned	Veteran	Gender	Race	Ethnicity	List proprietors, partners, officers,
							directors, all holders of outstanding stock.
							100% of ownership must be shown. Use separate sheet if necessary. Please
							reference the above codes to complete this
							table for each owner of the applicant
							business. More than one race may be
							selected.

** The gender/race/ethnicity/veteran data is collected for program reporting purposes only. Disclosure is voluntary and has no bearing on the credit decision.

ALL OUESTIONS MUST BE ANSWERED AND ARE SUBJECT TO VERIFICATION BY SBA

(1) Are you presently subject to an indictment, criminal information, arraignment, or other means	by which	formal
criminal charges are brought in any jurisdiction?	Yes 🗖	No 🗖
(2) Have you been arrested in the past six months for any criminal offense?	Yes 🗖	No 🗖
(3) For any criminal offense – other than a minor vehicle violation – have you ever: 1) been convi	cted; 2) pl	ead
guilty; 3) plead nolo contendere; 4) been placed on pretrial diversion; or 5) been placed on any for	m of parol	le or
probation (including probation before judgment)?	Yes 🗖	No 🗖
(4) Has an application for the loan you are applying for now ever been submitted to SBA or to a		
Certified Development Company or lender in connection with any SBA program?	Yes 🗖	No 🗖

- (5) Are you presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency?Yes □ ...No □

If "YES" to Question 1, the loan request is ineligible for SBA assistance. If there is a "YES" response to Question 2 or 3, you must complete SBA Form 912 and furnish details on a separate sheet, including dates, location, fines, sentences, whether misdemeanor or felony, dates of parole/probation, unpaid fines or penalties, name(s) under which charged, and any other pertinent information. If "YES" to Questions 2 or 3, the lender will be required to conduct a background check and make a character determination in accordance with the procedures described in SOP 50 10 5. If "YES" to Question 3 and you are currently on parole or probation (including probation before judgment), the loan request is ineligible for SBA assistance. If the charge resulting in a "YES" was a single misdemeanor that was subsequently dropped without prosecution, you must provide documentation from the appropriate court or prosecutor's office along with the completed Form 912.

If "YES" to Questions 4, 5 or 6, <u>this application may not be submitted to SBA under any delegated or</u> <u>expedited processing method</u>, but must be submitted to the Standard 7(a) Loan Guaranty Processing Center (LGPC) for non-delegated processing. The only exception is an application that was declined under a 7(a) <u>Small Loan due to the applicant's credit score may be submitted under SBA Express procedures</u>. Note: This does not mean that your loan will be denied, only that your lender will need to use different SBA procedures to process the loan.

•	
 (7) Are you a U.S. Citizen? If "No," are you a Lawful Permanent resident alien? Provide Alien Registration Number 	
(8) Are any of your business' products or services exported or do you plan to begin exporting as result of this loan?	Yes 🗖 No 🗖
If "Yes," provide the estimated total export sales this loan will support: \$	
(9) Is your business a franchise?	Yes 🗖 No 🗖
(10) Does the Applicant business have any Affiliates?	Yes 🗖 No 🗖
Affiliation exists when one individual or entity controls or has the power to control another of party or parties control or have the power to control both. SBA considers factors such as ow management previous relationships with or ties to another entity, and contractual relationship determining whether affiliation exists. The complete definition of affiliation is found at 13 C also, 13 CFR 121.107 and 121.301.) An "Affiliate" includes, for example: (1) a parent comp subsidiaries and other companies that are owned or controlled by the Applicant; (3) compani officer, director, general partner, managing member or party owning 20% or more is also an general partner, managing member or 20% or greater owner of the Applicant; (4) companies unexercised options to own 50% or more of the Applicant's stock; and (5) companies that ha agreements to merge with the Applicant. If answered "yes," attach a listing of all Affiliates to this form.	nership, os when CFR 121.103. (See any; (2) es in which an officer, director, or individuals with
 (11) Have you, the Applicant, its Affiliates, or any business owned or controlled by you or any Associate ever obtained a direct or guaranteed loan from SBA or any other Federal agency o been a guarantor on such a loan? (This includes student loans and disaster loans.)	Yes □No □ Yes □No □ Yes □No □
(12) What is the existing number of employees currently employed by the business?	
(13) Number of jobs to be created as a result of the loan? Number of jobs that w result of the loan that would have been lost otherwise?	rill be retained as a
 (14) Have you or the Applicant used (or intend to use) a packager, broker, accountant, lawyer, etc in (a) preparing the loan application or any related materials and/or (b) referring the loan to t lender?	he …Yes □… No □

(15) Will more than \$10,000 of the loan proceeds be used for construction?If answer is "Yes," a SBA Form 601 will need to be completed.	Yes 🗖 No 🗖
(16) Are any of the Applicant's revenues derived from gambling or from the sale of p presentation of any depiction, displays or live performances, of a prurient sexual	
(17) Is the loan request for a Community Advantage Pilot Program loan?If answer is "Yes," a SBA Form 2449, Community Advantage Addendum will r	Yes \square No \square need to be completed.
SBA may not provide financial assistance to an applicant where there is any appearant an SBA or other governmental employee. <u>If any of the questions below are answered</u> not be submitted under any delegated or expedited processing method, but must be su delegated processing. Note: This does not mean that your loan will be denied, only the different SBA procedures to process the loan.	1 "False", this application may ibmitted to the LGPC for non-
 (18) No SBA employee, or the household member (see definition at * below) of an S2 proprietor, partner, officer, director, or stockholder with a 10 percent or more inter 105.204] (19) No former SBA employee, who has been separated from SBA for less than one year the statement of the statement	erest, of the Applicant. [13 CFR True False year prior to the request for
financial assistance, is an employee, owner, partner, attorney, agent, owner of sto debtor of the Applicant. [13 CFR 105.203]	ck, officer, director, creditor or True False
(20) No member of Congress, or an appointed official or employee of the legislative of Government, is a sole proprietor, general partner, officer, director, or stockholder interest, or household member of such individual, of the Applicant.	
[13 CFR 105.301(c)]	True False
(21) No Government employee having a grade of at least GS-13 or higher is a sole pr officer, director, or stockholder with a 10 percent or more interest, or a household the Applicant. [13 CFR 105.301(a)]	
(22) No member or employee of a Small Business Advisory Council or a SCORE vol	

- (22) No member or employee of a Small Business Advisory Council or a SCORE volunteer is a sole proprietor, general partner, officer, director, or stockholder with a 10 percent or more interest, or a household member of such individual, of the Applicant. [13 CFR 105.302(a)] True_____ False_____
- * A "**household member**" of an SBA employee includes: a) the spouse of the SBA employee; b) the minor children of said individual; and c) the blood relatives of the employee, and the blood relatives of the employee's spouse who reside in the same place of abode as the employee.[13 CFR 105.201(d)]

Please read the following restrictions regarding use of federal financial assistance programs. If you understand them fully and agree to them, sign your name at the end of this document.

SBA is required to withhold or limit financial assistance, to impose special conditions on approved loans, to provide special notices to applicants or borrowers and to require special reports and data from borrowers in order to comply with legislation passed by the Congress and Executive Orders issued by the President and by the provisions of various inter-agency agreements. SBA has issued regulations and procedures that implement these laws and executive orders. These are contained in Parts 112, 113, and 117 of Title 13 of the Code of Federal Regulations and in Standard Operating Procedures.

Privacy Act (5 U.S.C. 552a) -- Any person can request to see or get copies of any personal information that SBA has in his or her file when that file is retrieved by individual identifiers such as name or social security numbers. Requests for information about another party may be denied unless SBA has the written permission of the individual to release the information to the requestor or unless the information is subject to disclosure under the Freedom of Information Act.

Under the provisions of the Privacy Act, you are not required to provide your social security number. Failure to provide your social security number may not affect any right, benefit or privilege to which you are entitled. Disclosures of name and other personal identifiers are, however, required for a benefit, as SBA requires an individual seeking assistance from SBA to provide it with sufficient information for it to make a character determination. In determining whether an individual is of good character, SBA considers the person's integrity, candor, and disposition toward criminal actions. Additionally, SBA is specifically authorized to verify your criminal history, or lack thereof, pursuant to section 7(a)(1)(B), 15 USC Section 636(a)(1)(B) of the Small Business Act (the Act). Further, for all forms of assistance, SBA is authorized to make all investigations necessary to ensure that a person has not engaged in acts that violate or will violate the Act or the Small Business Investment Act, 15 USC Sections 634(b)(11) and 687(b)(a), respectively. For these purposes, you are asked to voluntarily provide your social security number to assist SBA in making a character determination and to distinguish you from other individuals with the same or similar name or other personal identifier.

The Privacy Act authorizes SBA to make certain "routine uses" of information protected by that Act. One such routine use is the disclosure of information maintained in SBA's investigative files system of records when this information indicates a violation or potential violation of law, whether civil, criminal, or administrative in nature. Specifically, SBA may refer the information to the appropriate agency, whether Federal, State, local or foreign, charged with responsibility for, or otherwise involved in investigation, prosecution, enforcement or prevention of such violations. Another routine use is disclosure to other Federal agencies conducting background checks; only to the extent the information is relevant to the requesting agencies' function. See, 74 F.R. 14890 (2009), and as amended from time to time for additional background and other routine uses.

Right to Financial Privacy Act of 1978 (12 U.S.C. 3401) -- This is notice to you as required by the Right to Financial Privacy Act of 1978, of SBA's access rights to financial records held by financial institutions that are or have been doing business with you or your business, including any financial institutions participating in a loan or loan guaranty. The law provides that SBA shall have a right of access to your financial records in connection with its consideration or administration of assistance to you in the form of a Government guaranteed loan. SBA is required to provide a certificate of its compliance with the Act to a financial institution in connection with its first request for access to your financial records, after which no further certification is required for subsequent accesses. The law also provides that SBA's access rights is required during the term of any approved loan guaranty agreement. No further notice to you of SBA's access rights is required during the term of any such agreement. The law also authorizes SBA to transfer to another Government authority any financial records included in an application for a loan, or concerning an approved loan or loan guarantee, as necessary to process, service or foreclose on a loan guaranty or collect on a defaulted loan guaranty.

Freedom of Information Act (5 U.S.C. 552) -- This law provides, with some exceptions, that SBA must supply information reflected in agency files and records to a person requesting it. Information about approved loans that will be automatically released includes, among other things, statistics on our loan programs (individual borrowers are not identified in the statistics) and other information such as the names of the borrowers (and their officers, directors, stockholders or partners), the collateral pledged to secure the loan, the amount of the loan, its purpose in general terms and the maturity. Proprietary data on a borrower would not routinely be made available to third parties. All requests under this Act are to be addressed to the nearest SBA office and be identified as a Freedom of Information request.

Flood Disaster Protection Act (42 U.S.C. 4011) -- Regulations have been issued by the Federal Insurance Administration (FIA) and by SBA implementing this Act and its amendments. These regulations prohibit SBA from making certain loans in an FIA designated floodplain unless Federal Flood insurance is purchased as a condition of the loan. Failure to maintain the required level of flood insurance makes the applicant ineligible for any financial assistance from SBA, including disaster assistance.

Executive Orders -- Floodplain Management and Wetland Protection (42 F.R. 26951 and 42 F.R. 26961) -- SBA discourages settlement in or development of a floodplain or a wetland. This statement is to notify all SBA loan applicants that such actions are hazardous to both life and property and should be avoided. The additional cost of flood preventive construction must be considered in addition to the possible loss of all assets and investments due to a future flood.

Occupational Safety and Health Act (15 U.S.C. 651 et seq.) -- This legislation authorizes the Occupational Safety and Health Administration in the Department of Labor to require businesses to modify facilities and procedures to protect employees or pay penalty fees. Businesses can be forced to cease operations or be prevented from starting operations in a new facility. Therefore, SBA may require additional information from an applicant to determine whether the business will be in compliance with OSHA regulations and allowed to operate its facility after the loan is approved and disbursed. Signing this form as an applicant is certification that the OSHA requirements that apply to the applicant business have been determined and that the applicant, to the best of its knowledge, is in compliance. Furthermore, applicant certifies that it will remain in compliance during the life of the loan.

Civil Rights Legislation (13 C.F.R. 112, 113, 117) -- All businesses receiving SBA financial assistance must agree not to discriminate in any business practice, including employment practices and services to the public on the basis of categories cited in 13 C.F.R., Parts 112, 113, and 117 of SBA Regulations. This includes making their goods and services available to handicapped clients or customers. All business borrowers will be required to display the "Equal Employment Opportunity Poster" prescribed by SBA.

Equal Credit Opportunity Act (15 U.S.C. 1691) -- The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status or age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act.

Executive Order 11738 -- Environmental Protection (38 F.R. 251621) -- The Executive Order charges SBA with administering its loan programs in a manner that will result in effective enforcement of the Clean Air Act, the Federal Water Pollution Act and other environment protection legislation.

Debt Collection Act of 1982, Deficit Reduction Act of 1984 (31 U.S.C. 3701 et seq. and other titles) -- These laws require SBA to collect aggressively any loan payments which become delinquent. SBA must obtain your taxpayer identification number when you apply for a loan. If you receive a loan, and do not make payments as they come due, SBA may take one or more of the following actions: (1) report the status of your loan(s) to credit bureaus, (2) hire a collection agency to collect your loan, (3) offset your income tax refund or other amounts due to you from the Federal Government, (4) suspend or debar you or your company from doing business with the Federal Government, (5) refer your loan to the Department of Justice or other attorneys for litigation, or (6) foreclose on collateral or take other action permitted in the loan instruments.

Immigration Reform and Control Act of 1986 (Pub. L. 99-603) -- If you are an alien who was in this country illegally since before January 1, 1982, you may have been granted lawful temporary resident status by the United States Immigration and Naturalization Service pursuant to the Immigration Reform and Control Act of 1986. For five years from the date you are granted such status, you are not eligible for financial assistance from the SBA in the form of a loan guaranty under Section 7(a) of the Small Business Act unless you are disabled or a Cuban or Haitian entrant. When you sign this document, you are making the certification that the Immigration Reform and Control Act of 1986 does not apply to you, or if it does apply, more than five years have elapsed since you have been granted lawful temporary resident status pursuant to such 1986 legislation.

Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4821 et seq.)

Borrowers using SBA funds for the construction or rehabilitation of a residential structure are prohibited from using lead-based paint (as defined in SBA regulations) on all interior surfaces, whether accessible or not, and exterior surfaces, such as stairs, decks, porches, railings, windows and doors, which are readily accessible to children under 7 years of age. A "residential structure" is any home, apartment, hotel, motel, orphanage, boarding school, dormitory, day care center, extended care facility, college or other school housing, hospital, group practice or community facility and all other residential or institutional structures where persons reside.

Executive Order 12549, Debarment and Suspension (13 C.F.R. 145) -- The prospective lower tier participant certifies, by submission of this loan application, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency. Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participants shall attach an explanation to the loan application.

By Signing Below, You Make the Following Representations, Authorizations and Certifications

REPRESENTATIONS AND AUTHORIZATIONS: I represent that I have read the items above and I understand them. I represent that I will comply, whenever applicable, with the hazard insurance, lead-based paint, civil rights or other limitations in this notice. I further represent that all SBA loan proceeds will be used only for business related purposes as specified in the loan application and, to the extent feasible, to purchase only American-made equipment and products. I authorize the SBA Office of Inspector General to request criminal record information about me from criminal justice agencies for the purpose of determining my eligibility for programs authorized by the Small Business Act, as amended.

<u>CERTIFICATION AS TO ACCURACY</u>: I certify that the information provided in this application and the information that I have provided in all supporting documents and forms is true and accurate. I realize that the penalty for knowingly making a false statement to obtain a guaranteed loan from SBA is that I may be fined up to \$250,000 and/or be put in jail for up to 5 years under 18 USC § 1001 and if false statements are submitted to a Federally insured institution, I may be fined up to \$1,000,000 and/or be put in jail for up to 30 years under 18 USC § 1014.

Signature

Date

Print Name

NOTE: According to the Paperwork Reduction Act, you are not required to respond to this collection of information unless it displays a currently valid OMB Control Number. The estimated burden for completing this form, including time for reviewing instructions, gathering data needed, and completing and reviewing the form is 9 minutes per response. Comments or questions on the burden estimates should be sent to U.S. Small Business Administration, Chief, AIB, 409 3rd St., SW, Washington DC 20416, and/or SBA Desk Officer, Office of Management and Budget, New Executive Office Building, Rm. 10202, Washington DC 20503. **PLEASE DO NOT SEND FORMS TO THESE ADDRESSES.**







First Community Bank 500 North Water Street, Suite 100 Corpus Christi, TX 78401 (361) 882-9310 Main (361) 882-9468 Fax SBAadmin@fcbot.com