

PART 3 FINANCING

IDENTIFY THE SOURCE(S) OF THE FUND USED TO PAY FOR THE EXPENSES LISTED IN PART 2

a BUSINESS SAVINGS & CHECKING Identify any funds from business accounts used to fund Expenses, Part 2

Account Number	Financial Institution	Date Opened	Signatories on Account	Current Balance	Drawn for Business
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$

Total dollar amount drawn from business accounts: **a** → \$

Description of Source (identify the sources) of money in the accounts listed above Contribution Frequency Contribution Amount

Description of Source (identify the sources) of money in the accounts listed above	Contribution Frequency	Contribution Amount
		\$
		\$
		\$
		\$

b PERSONAL SAVINGS & CHECKING Identify any funds from personal accounts used to fund Expenses, Part 2

Account Number	Financial Institution	Date Opened	Signatories on Account	Current Balance	Drawn for Business
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$

Total dollar amount drawn from business accounts: **b** → \$

Description of Source (identify the sources) of money in the accounts listed above Contribution Frequency Contribution Amount

Description of Source (identify the sources) of money in the accounts listed above	Contribution Frequency	Contribution Amount
		\$
		\$
		\$
		\$

C	LOANS FROM FINANCIAL INSTITUTIONS:	Identify any loans from financial institutions used to fund Expenses, Part 2				
Account Number	Financial Institution	Loan Date	Loan Term	Co-signers of Loan	Loan Amount	
					\$	
					\$	
					\$	
					\$	
					\$	
Total dollar amount loaned by financial institutions:					C →	\$
d	LOANS FROM INDIVIDUALS:	Identify any loans from individuals used to fund Expenses, Part 2				
Name of Individual	Loan Date	Source of Funds for Loan	% Investment	Loan Amount		
				\$		
				\$		
				\$		
				\$		
				\$		
Total dollar amount loaned by individuals:					d →	\$
e	SECURITIES	Identify any securities (stocks, bonds, CODs, etc.) sold to fund Expenses, Part 2				
Name of Security	Buy Date	Sell Date	# of Shares	Price	Ticker	Amount Invested
						\$
						\$
						\$
						\$
						\$
Total dollar amount drawn from the sale of securities:					e →	\$
f	GIFTS FROM INDIVIDUALS	Identify any gifts from individuals used to fund Expenses, Part 2				
Name of Giver	Date of Gift	Source of Funds or Gift	# Investment	Amount		
				\$		
				\$		
				\$		
				\$		
Total financing from gifts:					f →	\$

g	GIFTS/GRANTS FROM INSTITUTIONS	Identify any gifts and/or grants from institutions used to fund Expenses, Part 2		
Institution	Address (Street, City State)	Contact Name and Phone	Grant Date	Amount Gifted
				\$
				\$
				\$
				\$
Total money received from institutional gifts and/or grants:			g →	\$

h	OTHER FINANCING	Identify any financing (credit cards, etc.) used to fund Expenses, Part 2		
Description of Financing				Amount Financed
				\$
				\$
				\$
				\$
Total money drawn from other financing:			h →	\$

=	FINANCING TOTALS	Sub-total all funds (sections a-h) used to fund Part 2		
Business Accounts	a →	\$	Gifts from Individuals	f → \$
Personal Accounts	b →	\$	Gifts/Grants from Institutions	g → \$
Loans from Financial Institutions	c →	\$	Other Financing	h → \$
Loans from Individuals	d →	\$	TOTAL BUSINESS FINANCING (a-h)*	= → \$
Securities	e →	\$	*Should be equal or greater than total amount of expenses listed in part 2	

PART 4 ACKNOWLEDGEMENT REVIEW THE FOLLOWING STATEMENT AND SIGN YOUR ACKNOWLEDGEMENT BELOW

I hereby certify, under penalty of perjury, that I am authorized to execute this form and that all information I have provided on this form is complete, true, and correct. I certify that I understand that information provided on this Financial Disclosure Form may be corroborated. The City of Harvey reserves the right to request any and all documentation it determines necessary to perform this verification. I and/or my representative will have three business days to meet such requests, and failure to do so may result in a disapproved or suspended license application. I understand and accept that any falsification or purposely holding back of this information is grounds for recalling the license(s) issued.

Signature of Applicant

Date

Subscribed to and sworn to before me this _____ day of _____, 20_____.

Notary Public in and for said County and State

(PLACE SEAL HERE)