Business Borrower Loan Underwriting Form

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	Borrower Nam	e (Corporation)			Algorithm Wellin Grades P. P. Company (1996)			Officer Ti	le			
₩er	Borrower Addi	ess				Borrower City, State, Zip						
Borrower	Borrower Phon	e Number	Borrower Fax Number	er			Borrower County					
	Dr. Mrs Mrs Mr. Ms. Ms.		e (first, middle	last)		Male Female	Birth Date		Social Security Number			
	Home Address (include apt.)					City, State, Zip						
Individual	Preferred Phone number Email Address					L		ve any dependents? Yes No If yes, list ages				
		process or have you ever dec		Are you or have you ever t Excluding minor traffic violati	neen convicted ons) If yes, atta	d in any crimina ch explanation	al proceedings? □Yes □No		nave you ever been a defendant in any suits or ? If yes, attach explanation Yes No			
Indi	vidual's	Assets			Ind	ividual's	Liabilitie	es				
Cash, o	on hand and unre	estricted in banks	\$		Notes	payable to bank	s		\$			
Notes-r	eceivable		\$		Credit	cards			\$			
Cash surrender value life insurance (Do not deduct loans) Schedule 1					Loan(s	i) against life in:	surance		\$			
Listed () stocks, bonds,	\$		Taxes	accrued but unp	paid		\$			
Other s	tocks and bonds	s Schedule 2	\$			Mortgages payable on real estate Schedule 3 \$						
Mutual	funds		\$		Other I	iabilities - item	ize		\$			
Real es	tate at cost or m	arket value Schedule 3	\$						\$			
	ed retirement pl d benefit, 401(k		\$						\$			
Automo	obiles		\$						\$			
Busines	ss Value		\$						\$			
Other a	ssets - itemize		\$						\$			
			\$						\$			
Indi	vidual's	Total Assets	= \$				Total Lia		= \$			
Did	you rem	ember?			D		Net Wor		= \$			
☐ Full Legal Name of Individual					Alimon	Individual's Annual Gross Income Information Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.						
	Date of	Birth and SS Number			Earne	d Income (salar	y gross)		\$			
☐ Full Home Address, City, State and Zip (Individual)				Earne	Earned Income (bonus and commissions) \$							
_		. Boxes)		,	Portfo	lio Income (div	idends, interest,	etc.)	\$			
	Borrow	er's complete Corpora	tion Name		Passiv	Passive Income (real estate, etc.)						
		er's Corporate Office		, State and Zip,	Other	Other - itemize \$						
including County (No P.O. Boxes)					Individual's Total Annual Income \$							

The information set forth in any Personal Tax Return(s) and/or Personal Financial Statement provided to Synovus Bank (Bank) is true and correct and is provided to the Bank for the purpose of obtaining or maintaining credit or other accommodations. The Bank is authorized to confirm any of the information, and any person having knowledge regarding such information is hereby authorized to disclose that information to the Bank. The Bank is further authorized to: (1) from time to time obtain credit reports on me; and/or (2) furnish information regarding its credit experience with me to credit reporting agencies and other persons. The undersigned further certifies and warrants that all the information and statements provided in any Personal Tax Return(s) and/or Personal Financial Statement shall be true and correct at the time of closing of any loan (if any loan or credit agreement be approved by the Bank), and the undersigned shall notify the Bank of any changes in such information and statements before closing.

Agreed to:

Date (MM/DD/YY)

Supplementary Schedules (Take totals to front) Attach additional pages if necessary

Names of insured	Beneficiary	Insurance C	o.	Face amount of policy	Surrender value		Loans against policy		Annual oremium	Type of policy	Is policy assigned
			\$		\$	\$		\$			
			S		\$	\$		\$			
		Total	\$		\$	s		\$		•••	
Schedule 2 Indi	vidual's Sto	cks, Bon	ds and U	S Goveri	ment Secur	itie					
Description of ecurity	of Registered in name of		Face value (No. of shares				Total market value	Pledged Yes/No		on NYSE, NA: J) Government	
					\$	\$					
					\$	\$	- Parity II				
					Total Listed	\$					
					Total Unlisted	\$					
Schedule 3 Indi	vidual's Rea	al Estate									
Description or address to nelude city and state			tle in me of	Date	Market value		Origi		Unpa		Monthly
		714	ine (ii	acquired	value		amou	ınt ———	balar	iice	payment
				acquired	S		\$		\$	\$	payment
				acquired							payment
	1.74.004			acquired	\$		\$		\$	\$	раушен
				acquired	s	-	s		\$	s s	раушен
				acquired	\$ \$		\$ \$		\$ \$	s s	раушен
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				acquired	\$ \$ \$ \$ \$ \$		\$ \$ \$ \$ \$ \$		\$ \$ \$ \$ \$ \$	s s s	раушен
				acquired	\$ \$ \$ \$ \$ \$ \$		\$ \$ \$ \$ \$ \$ \$		\$ \$ \$ \$ \$ \$ \$ \$	s s s	раушен
				acquired	\$ \$ \$ \$ \$ \$ \$ \$ \$		\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	s s s s	раушен

Agent	and the second s	Other Advisors	Other Advisors			
Agent's Name	Agent's Name	Name	Name			
Agent's Phone Number	Agent's Phone Number	Position	Position			
Agent's Email Address	Agent's Email Address	Phone number	Phone number			