
INCOME PROPERTY LENDING

A division of the All Star Group, Inc.

CHECKING AND SAVINGS ACCOUNTS SCHEDULE

Addendum to Loan Application Dated: _____

APPLICANT: _____

(Please provide complete account numbers and mailing addresses of all open accounts.)

INSTITUTION: _____

STREET ADDRESS: _____

CITY/STATE/ZIP _____

ACCOUNT TYPE	ACCOUNT IN NAME OF	ACCOUNT NUMBER	BALANCE

INSTITUTION: _____

STREET ADDRESS: _____

CITY/STATE/ZIP _____

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