|  |  |  |
| --- | --- | --- |
| logo | Licensing and Regulation1025 Union Ave SEPO Box 43098 Olympia WA 98504-3098Phone: 360 664-1600 Fax: 360 753-2710[www.lcb.wa.gov](http://www.lcb.wa.gov)  |       |
| License Number |
|       |
| Trade Name |
|       |
| UBI Number |

**Source of Funds and Certification for the Person or Entity Loaning, Gifting, or Investing Money**

|  |
| --- |
| **Name Of Person And Business To Which Money Is Being Loaned Or Gifted To, Or Invested In:** |
| **Person:**  |  | **Business:**  |

**Your Name/Entity**

|  |  |  |
| --- | --- | --- |
| ***Your Entity Name:*** | ***Day Phone:***  | ***Date of Birth:*** |
| ***Your Last Name****:*  | ***Your First Name****:*  | ***Your Middle Initial****:*  |
| **Mailing Address: Street/Route/PO Box** | ***City*** | ***County*** | ***State or Country*** | ***Zip Code*** |

State where **ALL** the money you are gifting, loaning or investing is coming from. Additional information may be written on a separate sheet of paper and submitted with this form. Please follow the form set-up below, sign and date.

**1. Savings/Checking/ Investment Accounts**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Bank/Institution Name |       | Account # |       | $ |       |
| Bank/Institution Name |       | Account # |       | $ |       |
| Bank/Institution Name |       | Account # |       | $ |       |
|  |  |  | Total 1 | $ |       |

**2. Loans From Banks/Mortgage Companies/Credit Cards, Etc.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Bank/Institution Name |       | Account # |       | $ |       |
| Bank/Institution Name |       | Account # |       | $ |       |
| Bank/Institution Name |       | Account # |       | $ |       |
|  |  |  | Total 2 | $ |       |

**3. Cash You Borrowed, Gifted or Were Loaned From Personal Source**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Bank/Institution Name |       | Account # |       | $ |       |
| Bank/Institution Name |       | Account # |       | $ |       |
| Bank/Institution Name |       | Account # |       | $ |       |
|  |  |  | Total 3  | $ |       |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Total of 1,2 & 3 above** | **$** |       |

|  |  |
| --- | --- |
|  | **Does the money you have gifted, loaned or invested give you a percentage or part ownership in the business?** [ ]  **YES** *[If YES, what percent \_**\_\_\_\_\_\_%]* [ ]  **NO** |

|  |
| --- |
| **Certification:** *I certify under penalty of perjury that all answers and statements are true, correct and complete. I hereby authorize investigation of my financial records and other sources as necessary for licensing.* |

|  |  |  |
| --- | --- | --- |
|       |  |  |
| **Print Name** |  | **Location Signed** |
|  |  |  |
| **Signature** |  | **Date** |