OMB APPROVAL NO.3245-0178 Expiration Date: 04/30/2016

AND BUSH

United States of America

Please Read Carefully: SBA uses Form 912 as one part of its assessment of program eligibility. Please reference SBA Regulations and

	S CONTRACTOR OF THE STATE OF TH	BUSINESS ADMI		Standard Operating Procedures if y submit this form and where to sub-		
,				SBA's Answer Desk at 1-800-U-ASK	-SBA (1-800)-827-5722), or check SBA's
	1953 STATEMENT OF PERSONAL HISTORY			website at www.sba.gov. DO NOT SEND COMPLETED FORMS TO OMB as		
.401 %.			this will delay the processing of your application; send forms to the address			
Name and Address of Applicant (Firm Name)(Street, City, State, and ZIP Code)			provided by your lender or SBA representative. SBA District/Disaster Area Office			
INGI	me and Address of Applicant (Firm N	ame/(offeet, offy, ofate, and	la Zii Gode)	ODA DISTRICTORSASTEL ATEA Office		
				Amount Applied for (when applicable)	File No. (if I	(nown)
				Amount applied for (whom applieds)	1 110 110: (11 1	anown,
1.	Personal Statement of: (State name in full, if no middle name, state (NMN), or if initia only, indicate initial.) List all former names used, and dates each name was used. Use separate sheet if necessary.			Sive the percentage of ownership or stock owned or to be owned in the small business or the development company		
	First Mid	dle	Last	3. Date of Birth (Month, day, and year)		
				4. Place of Birth: (City & State or Foreig	n Country)	
Name and Address of participating lender or surety co. (when applicable and known)				5. U.S. Citizen? YES NO INITIALS: If No, are you a Lawful Permanent resident alien: If non- U.S. citizen provide alien registration number:		
6.	Present residence address:			Most recent prior address (omit if over 10 years ago):		
	From:			From:		
	To:			То:		
	Address:			Address:		
	Home Telephone No. (Include Area	*				
DI.	Business Telephone No. (Include A	· · · · · · · · · · · · · · · · · · ·	CARRING DISCLO	SURE OF INFORMATION AND THE U	ISES OF S	LICH INFORMATION
MI O1	SDEMEANOR OR FELONY, DATHER PERTINENT INFORMATI	ATES OF PAROLE/PRO ON. AN ARREST OR C	DBATION, UNPAID	ATE SHEET. INCLUDE DATES, LOCA FINES OR PENALTIES, NAME(S) U ORD WILL NOT NECESSARILY DISQ ED AND SUBJECT YOU TO OTHER	NDER WHI	CH CHARGED, AND ANY DU; HOWEVER, AN
7.	Are you presently subject to an indic	ctment, criminal information	, arraignment, or othe	r means by which formal criminal charges ar	e brought in a	any jurisdiction?
	Yes No		INITIALS:			
8.	Have you been arrested in the past	six months for any criminal	offense?			
	Yes No	,	INITIALS:			
	For any criminal offense – other than 5) been placed on any form of parole Yes No		•	n convicted; 2) plead guilty; 3) plead nolo co nt).	ontendere; 4)	been placed on pretrial diversion;
10.	I authorize the Small Business Adm determining my eligibility for prograr			criminal record information about me from c Small Business Investment Act.	riminal justice	agencies for the purpose of
				ent on this form is a violation of Federal law		
mo	re than five years and/or a fine of up	to \$250,000; under 15 USC	645 by imprisonment	pation. A false statement is punishable under tof not more than two years and/or a fine of years and/or a fine of not more than \$1,000	not more than	
Sig	nature		Title			Date
Ag	ency Use Only					
11.	Fingerprints Waived			12. Cleared for Processing	Date	Approving Authority
		Date Appro	oving Authority	13. Request a Character Evaluation		
	Fingerprints Required	Date Appro	oving Authority		Date	Approving Authority
ı	Date Sent to OIG	дате Аррго	oving Authority	(Required whenever 7, 8 or 9 are answ	ered "yes" ev	ren if cleared for processing.)
PL				ot required to respond to any collection of information comments to U.S. Small Business Administration. C		

approval number. If you want to submit to submit to the burden for the small business Administration, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20416 and Desk Officer for the Small Business Administration, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20503. OMB Approval 3245-0178. DO NOT SEND COMPLETED FORMS TO OMB as this will delay the processing of your application; send forms to the address provided by your lender or SBA representative.

NOTICES REQUIRED BY LAW

The following is a brief summary of the laws applicable to this solicitation of information.

Paperwork Reduction Act (44 U.S.C. Chapter 35)

SBA is collecting the information on this form to make a character and credit eligibility decision to fund or deny you a loan or other form of assistance. The information is required in order for SBA to have sufficient information to determine whether to provide you with the requested assistance. The information collected may be checked against criminal history indices of the Federal Bureau of Investigation.

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. In making loans pursuant to section 7(a)(6) the Small Business Act (the Act), 15 USC § 636 (a)(6), SBA is required to have reasonable assurance that the loan is of sound value and will be repaid or that it is in the best interest of the Government to grant the assistance requested. Additionally, SBA is specifically authorized to verify your criminal history, or lack thereof, pursuant to section 7(a)(1)(B), 15 USC § 636(a)(1)(B). 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 §§ 634(b)(11) and 687b(a). 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.

When the information collected on this form indicates a violation or potential violation of law, whether civil, criminal, or administrative in nature, SBA may refer it 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. See 74 Fed. Reg. 14890 (2009) for other published routine uses.