

Appendix XX
Drop/Add Form for Services and Institutions

FOR SUPERVISOR USE ONLY

Exhibit #5

**Dropped or Added
Financial Institution and Service Form**

Please complete this form WITH A SUPERVISOR if you are conducting an interview and the respondent remembers a financial institution or service *after* you have already gone through the appropriate section of the interview, remembers that a particular loan or service is not related to business, or an institution was entered under the wrong service category.

Section A: Case Information and Institution Name

Complete this section for EACH dropped or added service. NOTE: A service that was entered in the wrong category (e.g., a line of credit that should be a mortgage) must be dropped AND added, please submit these forms together.

DATE: _____

INTERVIEWER NAME: _____

SU_ID (ALSO KNOWN AS CASE ID) _____

INSTITUTION NAME: _____

CIRCLE ONE: DROP ADD MOVE DROP MOVE ADD

FINANCIAL SERVICE: (Below, circle action and one type of service per form. Additional services require additional forms. ONE SERVICE PER FORM ONLY)

DEPOSIT	LOAN	OTHER
Checking	Line of Credit	Transaction Service
Savings	Capital Lease	Cash Management Service
COMPLETE "SECTION B" ON BACK OF FORM	Mortgage	Credit-related Service
	Motor Vehicle	Trust Service
	Equipment	Brokerage Service
	Other Loan (see Q7)	Card-processing Service
	COMPLETE "SECTION C" ON BACK OF FORM	THIS FORM IS NOW COMPLETE.

IF THE SERVICE WAS DROPPED, THIS FORM IS NOW COMPLETE.

Section B: Checking or Savings Accounts

1. Current balance, or balance as of last statement: \$ _____

Section C: Loans

1. Number of loans at institution named above: _____

2. Total credit limit (for lines of credit only): _____

3. Amount owed on loan(s) currently: _____

4. Was a personal guaranty, cosigner, etc. required? YES NO

5. Was collateral required? YES (Ask 5a) NO

5a. What collateral was required? (Circle all that apply)

- | | | |
|-------------------------------------|-----|----|
| 1) inventory or accounts receivable | YES | NO |
| 2) equipment or vehicles | YES | NO |
| 3) business securities or deposits | YES | NO |
| 4) business real estate | YES | NO |
| 5) personal real estate | YES | NO |
| 6) other personal assets | YES | NO |
| 7) other (please describe:) | YES | NO |

Describe: _____

6. For lines of credit, was a compensating balance in checking or savings required?

YES NO

7. If "other loan" selected in Section A, please specify what loan was for:

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