## **Individual Personal Guaranty**

		DATED:	20
I.			
residing at	(Individual's Name)		
	(Individual's personal address, city, state, zip)		
for and in co	Sideration of		
extending cre	edit to (Name of Credit Applicant Company)		
(hereafter referred to as the "Company") of which and in reliance on any guaranty of said credit, I, hereby personally guarantee to you the payment of any obligation (Individual's Name) of the Company and I hereby agree to bind myself to pay you on demand any sum which may become due to you by the Company whenever the Company shall fail to pay the same. It is understood that this guaranty shall be a continuing and irrevocable guaranty, and indemnity for such indebtedness of the Company. I do hereby waive notice of default, nonpayment and notice thereof and consent to any modification or renewal of the credit agreement hereby guaranteed. The Officer(s) of the Company must sign below as individuals – signatures only, no corporate titles. Social Security Number Print Individual's Name			
			Dated
Witness signa	ature	-	
Print Witness	Name	_	
Address			
Dated			
Delivery/Dee	the second states of the second states and the second states of the seco	a ality of <b>(f</b> act) also il la stara ta di di	

**Delivery/Receipt** – any signed document transmitted by facsimile machine (fax) shall be treated in all manner and respects, as an original document and the signature of any Party upon a document transmitted by fax shall be considered an original signature.



Business Credit Management Association Inc., Wisconsin Standard approved creditors' form

Form PG12013