

State of New Hampshire

Banking Department

169 Manchester Street
Concord, New Hampshire 03301

Telephone: (603) 271-3561
FAX: (603) 271-1090

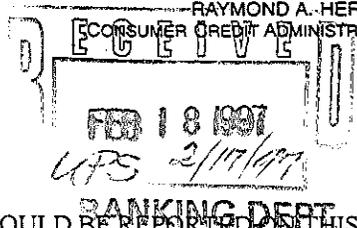
A. ROLAND ROBERGE
BANK COMMISSIONER
ALLAN N. JEANNOTTE
DEPUTY BANK COMMISSIONER
JEAN M. DOBBINS
CHIEF BANK EXAMINER

Form 397-A-1 FIRST MORTGAGE BANKER/BROKER ANNUAL REPORT

KATHLEEN L. BELANGER
ADMINISTRATOR, REGULATION & LICENSING
RAYMOND A. HEROUX
CONSUMER CREDIT ADMINISTRATOR

READ INSTRUCTIONS CAREFULLY

INSTRUCTIONS



- ONLY INFORMATION REGARDING NEW HAMPSHIRE FIRST MORTGAGE LOANS SHOULD BE REPORTED ON THIS FORM. Don't double-count loans. List all 1996 loans brokered on Schedule A and all 1996 loans made on Schedule B.

- Fully completed reports must be postmarked on or before February 1. Failure to file a fully completed report by February 1 shall result in a \$25/per day fine for each licensed location .

- Complete all items. DO NOT leave items blank. Reports with blank items will be returned for completion. Fines will be assessed based on the postmark date of completed reports. The department is under no obligation to review and return incomplete reports before the February 1 deadline.

- If you did not make or broker any New Hampshire loans during the reporting year, you must either provide the department with a WRITTEN statement to such effect which is postmarked on or before February 1,

OR

Utilize this form and make an affirmative statement that no such loans were made/brokered, (ie: "none", "O", "zero", etc.). DO NOT use "N/A", state "not applicable" or leave blank.

- Items requiring a numerical response which are marked "N/A" or "not applicable", or forms submitted with items left blank, will be considered incomplete, will be returned, and will be subject to fines if not completed and returned to this office on or before February 1.

- Fines will NOT be waived for failure to submit a fully completed report postmarked on or before February 1. Failure to submit a fully completed report shall be considered to be within the control of the licensee.

- If you held a license for any portion of the reporting year you must file a report, even if no loans were made or brokered. Failure to file will result in a \$25/ per day fine for each licensed location.

- REPORTS TRANSMITTED VIA "FAX" WILL NOT BE ACCEPTED. LATE FILING FINES WILL BE ASSESSED UNLESS AN ORIGINAL SIGNED AND NOTARIZED REPORT FORM IS RECEIVED BY THIS OFFICE POSTMARKED ON OR BEFORE FEBRUARY 1.

Reporting Period Ended December 31, 19 96

License #2503 MB
ending 12/31/96
(for reporting period)

Name of licensee Financial Resources & Assistance Inc. License #(s) _____

Trade name d/b/a (if applicable) _____

Place of business 15 Northview Drive, Meredith, NH 03253
(street) (city) (state) (zip)

Number of offices included 1 (If more than one office, attach sheet listing addresses of all offices included in this report.)

Type of business conducted: Mortgage Banker X Mortgage Broker X (Check both if applicable.)

Company contact person (President, Chief Executive Officer or Senior Partner of Licensee)

Name Scott D. Farah Title President

Business Address: Same
(Street)

603-279-1133

(City) (State) (Zip) (Direct Line Telephone)

**SCHEDULE A
NH FIRST MORTGAGE LOANS BROKERED**

	<u>No. of NH Loans</u>	<u>\$ Amount (Omit Cents)</u>
NH first mortgage loans <u>BROKERED</u> during reporting year	122 ✓	\$11,193,570 ✓

**SCHEDULE B
ANALYSIS OF NH FIRST MORTGAGE LOANS MADE**

	<u>No. of NH Loans</u>	<u>\$ Amount (Omit Cents)</u>
NH first mortgage loans MADE during reporting year	* _____	# _____
Total balances outstanding on Dec 31 for all NH first mortgage loans retained or serviced	_____	_____

**SCHEDULE C
ANALYSIS OF NH FIRST MORTGAGE LOANS MADE BY NUMBER AND DOLLAR AMOUNT**

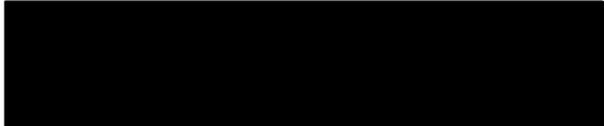
NH first mortgage loans MADE during reporting year:

	<u>No. of NH Loans</u>	<u>\$ Amount (Omit Cents)</u>
\$ 1 thru \$ 50,000	_____	\$ _____
\$ 50,001 thru \$ 75,000	_____	_____
\$ 75,001 thru \$100,000	_____	_____
\$100,001 thru \$125,000	_____	_____
\$125,001 thru \$150,000	_____	_____
Over \$150,000	_____	_____
Total NH first mortgage loans MADE	* _____	# \$ _____

* Must agree
Must agree

AFFIDAVIT

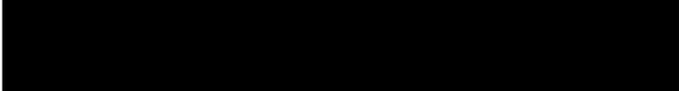
I, SCOTT FARAH, the undersigned,
being the President of the Financial Resources Inc.
swear, that to the best of my knowledge and belief the information supplied on this form, including accompanying schedules and
statements (if any) are true and correct.



Signature

State of New Hampshire
County of Rockingham ss

Subscribed and sworn to before me this 17th day of February, 19 97



Notary Public/Justice of the Peace

My commission expires _____

My Commission Expires September 8, 1999