	PERS	ONAL FIN	IANCIALS	STATEMEN	ΙΤ			
		As of	<u> </u>	20				
Complete this form for each another individual, record on owned by the applicant firm.	ly your port	ion of said a	asset or liabi	lity. Do not i		• •		
Name:		Business Phone:						
Residence Address:	Residence Phone:							
City, State & Zip Code:								
Asset	S		Liabilities					
Cash on Hand & in Banks	\$		Accounts Payable			\$		
Savings Accounts	\$		Notes Payable to Banks & Others (Describe in Section 1)			\$		
IRA or Retirement Accounts	\$		Installment Accounts (Auto)		\$			
Accounts & Notes Receivable	\$		Installment Accounts (Other)			\$		
Life Insurance Cash Surrender Value (Describe in Section 7)	\$		Loans on Life Insurance		\$			
Stocks & Bonds (Describe in Section 2)	\$		Mortgages on Real Estate (Describe in Section 3)		te	\$		
Real Estate (Describe in Section 3)	\$		Unpaid Taxes (Describe in Section 5)			\$		
Automobile - Present Value	\$		Other Liabilities (Describe in Section 6)			\$		
Other Personal Property (Describe in Section 4)	\$		TOTAL LIABILITIES		\$			
Other Assets (Describe in Section 4)	\$							
TOTAL ASSETS	\$							
	=			nks and Othe				
Name & Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Payment How Some		ecured or Endorsed / Type of Collateral		
		Stocks & Bonds						
Name of Securities or Fund		Original Cost			ent Market Value			

		•					
	Section 3 - Real Estate (Owned					
List each parcel separately. Use attachments if necessary.							
	Property A	Property B	Property C				
Type of Property							
Address							
Date Purchased							
Original Cost							
Present Market Value							
Current Mortgage Balance	. 4 Oth D						
Section 4 - Other Personal Property & Assets							
Section 5 - Unpaid Taxes							
	Section 6 - Other Liab	ilities					
	Section 7 - Life Insurance	ce Held					
I certify that the above statements are tru							
for the purpose of MBE/WBE/VBE certification	ation. I understand that	false statements may res	ult in the forfeiture of				
certification and possible prosecution.							
Signature:		Date:					