## **Personal Financial Statement**

Not to be used for Business Statements

ersonal financial statement for	SSN
	Name
	dress, City, State, ZIP
Home Phone No.  Name of Spouse	Bus. Phone No.
·	
As of	 Day Year
CURRENT ASSETS	CURRENT LIABILITIES
Cash on hand (not in bank)	Notes payable to (names & addresses):
	Sales Contracts & Chattel Mtgs. (Sch. 6)
Stocks and bonds (Schedule 1)	Accounts payable
Notes receivable (Schedule 3)	Current portion of long term debt
	Other current liabilities (Schedule 6)
······	Current Year's Income Taxes Unpaid
	Prior Year's Income Taxes Unpaid
	———— Real Estate Taxes Unpaid
TOTAL CURRENT ASSETS	TOTAL CURRENT LIABILITIES
FIXED ASSETS	LONG TERM LIABILITIES
Real estate (Schedule 4):	Real estate debt (Schedule 4):
Residence	Residence
Other	Other
Other assets and investments (Schedule 6)	
	Other long term debt (Schedule 6)
	TOTAL LONG TERM LIABILITIES
TOTAL FIVED ASSETS	
TOTAL FIXED ASSETS	NET WORTH
TOTAL ASSETS	TOTAL LIABILITIES AND NET WORTH
ontingent Liabilities	

Name of Security	No. Shar	res If any p	ledge, State to	o Whom	Whom and for What Purpose			Div. Paid Last 2 Yrs		Ma	Market Value		Вс	ok Value	
								TOTALS		\$			\$		
2. ACCOUNTS REC	FIVARI F														
Name and Address (street and city) From Whom Due				For What is it Due			e When		Sold	Whe	en Due	Am	ount		
				•							TOT	AL	\$		
B. NOTE RECEIVAB	LE														
Name and Address (street and city) From Whom Due			For What Due			Но	How Secured		Date		Maturity		Amount		
											TOT	AL	\$		
. REAL ESTATE															
Description of Property Title in Name of		Market Value Cost			Date Acquired E		Amount Encumbrance		Monthly Payments		Month Incom				
				TOTAL											
LIEE INQUENIOE		/A1115			-		<u>l</u>						I		
5. LIFE INSURANCE Name of Compan		VALUE icy Number   Name of In:		sured Beneficiary			Face Value		Cash Val		alue Amo		ount Borrowed		
-															
OTHER ASSETS		LITIES					 		I						
6. OTHER ASSETS AND LIABILITIES Other Current Assets (itemize)					Other Current Liabilities (itemize)								Amount		
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Date Signed \_\_\_\_\_

Signature \_\_\_\_\_

Soc. Sec. No. \_\_\_\_\_ Date of Birth \_\_\_\_\_