



Department of Economic and Community Development

Personal Financial Statement



As of _____, 20____

Applicant

Name: _____

Address: _____

Telephone: _____

Social Security #: _____

Date of Birth: _____

Co-Applicant

Name: _____

Address: _____

Telephone: _____

Social Security #: _____

Date of Birth: _____

Borrower/Company Name: _____

Balance Sheet

Assets

Checking/Savings Accounts (Section 1) \$ _____
 Marketable Securities (Section 2) _____
 Non-Marketable Securities (Section 3) _____
 Pension/IRA _____
 CSV Life Insurance (Section 4) _____
 Real Estate—Wholly Owned (Section 5) _____
 Real Estate—Partially Owned (Section 6) _____
 Personal Property (Section 7) _____
 Other Assets (Section 8) _____
Total Assets \$ _____

Liabilities

Bank Loans (Section 9) \$ _____
 Notes Payable to Others (Section 10) _____
 Accounts & Bills Due _____
 Credit Cards _____
 Mortgages _____
 Unpaid Taxes (Section 11) _____
 Other Liabilities (Section 12) _____
 Total Liabilities _____
 Net Worth _____
Total Liabilities & New Worth \$ _____

Annual Income and Expenses

For Year Ending: _____

Annual Income

Salary \$ _____
 Commission/Bonuses _____
 Dividend/Interest Income _____
 Accts. & Notes Rec. _____
 Rental Income _____
 Other Income _____
Total Income \$ _____

Annual Expenses

Mortgage/Rental Payment \$ _____
 State, Fed., Local Taxes _____
 Insurance Premiums _____
 Other Loans, Credit Cards _____
 Alimony, Child Support _____
 Other Expenses (tuition, misc.) _____
Total Expenses \$ _____

Contingent Liabilities

Contingent Liab.:
 Yes___ No___
 Pending Litigation:
 Yes___ No___
 Special Debts:
 Yes___ No___
 Tax Liens:
 Yes___ No___
 Guarantor:
 Yes___ No___
 Other Liabilities:
 Yes___ No___
Total Contingent Liab. \$ _____

If Yes, Amount

Section 1. – Checking/Saving/Certificates of Deposits

Name of Account	Type	Bank	Maturity	Amount

Section 2. – Marketable Securities

Number of Shares/Bonds	Name of Security	Market Value	As of

Section 3. – Non-Marketable Securities

Number of Shares/Bonds	Name of Security	Market Value	As of

Section 4. – Life Insurance

Company	Beneficiary	Face Value	Cash Surrender Value

Section 5. – Real Estate Wholly Owned

Description & Location	Date Acquired	Title in Name of	Purchase Price	Mortgage Holder	Market Value	Monthly Payments	Mortgage Balance

Section 6. – Real Estate Partially Owned

Description & Location	Date Acquired	Title in Name of	Purchase Price	Mortgage Holder	Market Value	Monthly Payments	Mortgage Balance

Section 7. – Personal Assets (Please describe)

Section 8. – Other Assets (Please describe)

Section 9. – Bank Loans

Lender	Amount of Loan		Monthly Pmt.	Maturity	Security for Loan
	Original Bal.	Present Bal.			

Section 10. – Notes Payable to Others

Lender	Amount of Loan		Monthly Pmt.	Maturity	Security for Loan
	Original Bal.	Present Bal.			

Section 11. - Unpaid Taxes

	Type	Amount	Past Due	Payment Terms
Federal				
State				
Local				

Section 12. – Other Liabilities (Please Describe)

Certification

I hereby represent that to the best of my knowledge and belief no information or data contained in this Personal Financial Statement (“PFS”) or in the attachments are in any way false or incorrect and that no material information has been omitted. The undersigned agrees that banks, credit agencies, creditors, and other references are hereby authorized now, or anytime in the future, to give the Department of Economic and Community Development any and all information in connection with matters referred in this PFS, including information concerning the payment of taxes by the applicant.

Applicant Signature: _____ Print Name: _____ Date: _____

Co-Applicant Signature: _____ Print Name: _____ Date: _____

Return to:

C/O _____
DEPARTMENT OF ECONOMIC AND COMMUNITY DEVELOPMENT
STATE OF CONNECTICUT
450 Columbus Blvd, Suite 5
Hartford, CT 06103-1843
Phone: (860) 500-2300
Fax: (860) 270-8077

Instructions

If there is not sufficient room on this form to describe all assets you own or liabilities you owe, please attach additional sheets. Please identify additional sheets as supplemental to this statement.

Page One

Social Security Number – Required for yourself and your spouse, if filing a joint personal financial statement.

Balance Sheet

Marketable Securities – List the current market value of all publicly traded stocks and bonds, i.e. listed on the New York or American Stock Exchanges, NASDAQ or otherwise published in the press. Please describe in Section 2.

Non-Listed Securities – Use this section to list the value of any closely held firms you own, as well as any other stocks and bonds whose values are not published in the press. Describe in Section 3.

CSV Life Insurance – In preparing the balance sheet, please enter only the Cash Surrender Value (CSV) of all life insurance policies. In section 4 list both the CSV and the full amount (Face Value) of all life insurance policies.

Real Estate – List the current market value of all real estate. If partially owned, please list on the balance sheet the value of your percentage interest. Please describe in Section 5.

Accounts Payable – Total of Regular bills for the year (i.e. utilities, phone, auto/home insurance).

Mortgage, Notes, Credit Cards, and Other Liabilities Payable – Please show principal balance you owe not monthly payment.

Net Worth – Total assets minus total liabilities. Totals on both sides must be equal.