



**DEPARTMENT OF REVENUE**  
**Statement of Financial Condition for Individuals**

*(If additional space is needed, attach separate sheet)*

1. Taxpayer's name(s) and address(es) <i>(including county)</i>	2. Home phone number	3. Marital status
	4. Social Security Number(s)	a. Taxpayer b. Spouse

**SECTION I – EMPLOYMENT INFORMATION**

5. Taxpayer's employer of business (name and address) or	6. Business phone number	7. Occupation
	8. Paydays	9. <i>(Check appropriate box)</i> <input type="checkbox"/> Wage earner <input type="checkbox"/> Partner <input type="checkbox"/> Sole Proprietor
10. Spouse's employer or business (name and address) or	11. Business phone number	12. Occupation
	13. Paydays	14. <i>(Check appropriate box)</i> <input type="checkbox"/> Wage earner <input type="checkbox"/> Partner <input type="checkbox"/> Sole Proprietor

**SECTION II – PERSONAL INFORMATION**

15. Name, address and telephone number of next of kin or other reference	16. Age and relationship of dependents (exclude husband and wife) living in your household	17. Number of exemptions claimed on Form W-4
18. Date of birth	a. Taxpayer	b. Spouse

**SECTION III – GENERAL FINANCIAL INFORMATION**

19. Latest PA income tax return filed <i>(tax year)</i>	20. Adjusted gross income on return
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21. Bank accounts *(include Savings and Loans, Credit Unions, IRA and KEOGH accounts, Certificates of Deposit, etc.)*

Name of Institutions	Address	Type of Account	Account Number	Balance
				\$
<b>Total (Enter in Item 28)</b>				\$

22. Bank charge cards, lines of credit, etc.

Type of Account or Card	Name and Address of Financial Institution	Monthly Payment	Credit Limit	Amount Owed	Credit Available
		\$	\$	\$	\$
<b>Total (Enter in Item 34)</b>		\$	\$	\$	\$

23. Safe deposit boxes rented or accessed *(List all locations, box numbers and contents)*

<b>24. Real Property</b> <i>(Brief description and type of ownership)</i>	<b>Address</b> <i>(Include county and state)</i>			
a.				
b.				
c.				
<b>25. Life Insurance</b> <i>(Name of Company)</i>	Policy Number	Type	Face Value	Available Loan Value
			\$	\$

**SECTION III – GENERAL FINANCIAL INFORMATION (continued)**

26. Additional Information (*Court proceedings, bankruptcies, repossessions, recent transfers of assets for less than full value, anticipated increases in income, condition of health, etc., include information on trusts, estates, retirement plans, etc., on which you are a participant of beneficiary*)

**SECTION IV – ASSET AND LIABILITY ANALYSIS**

(a) Asset or Liability	(b) Description	(c) Current Market Value	(d) Liabilities Balance Due	(e) Amount of Monthly Payment
27. Cash		\$		
28. Bank accounts				
29. Stocks, bonds, investments			\$	\$
30. Cash or loan value of insurance				
31. Vehicles ( <i>model, year, license</i> )	a.			
	b.			
	c.			
32. Real property	a.			
	b.			
	c.			
33. Other assets	a.			
	b.			
	c.			
34. Bank revolving credit				
35. Other liabilities <i>(include judgements, notes and other charge accounts)</i>	a.			
	b.			
	c.			
	d.			
36. Federal taxes owed				
37. State taxes owed				
<b>38. TOTALS</b>		<b>\$</b>	<b>\$</b>	<b>\$</b>

