## **Financial Statement-** Strictly Confidential

Name:	- Di	none:
Street	Phone:	
Address:		
	State:	-Zip Code:
	<u>ASSETS</u>	
	Cash on Hand in Banks	\$
	Cash on Hand in Banks	\$
	Accounts, Loans and Notes Receivable	
	Cash Surrender Value of Life Insurance	
	Value of Businesses Owned	\$
	Real Estate	<u> </u>
	( Household Furnishings and Personal Effects	· 
	\$ Other Assets Itemized Below:	
		\$
		\$
	TOTAL ASSETS LIABILITIES	\$
	Notes Payable	
	Liens on Real Estate	S
	Other Liabilities Itemized Below:	\$
		\$
	TOTAL LIABILITIES	
	NET WORTH  TOTAL ASSETS - TOTAL LIABILITIES	\$
	SOURCE OF INCOME	<u> </u>
	Salary \$	
	Dividends and Interest	<u> </u>
	Bonus and Commissions	\$
	Salary	\$
	TOTAL INCOME	\$
	rstood that this information will be held in strict confidence by t	he Broker, its agents and officers.
	rsigned certifies that this information is true and correct.	Č
C:		Datas
Signatur	e:	Date: