

Onondaga County MWBE Certification

ATTACHMENT B: PERSONAL FINANCIAL STATEMENT WORKSHEET

Complete this worksheet to determine the individual personal net worth as part of the application for Onondaga County MWBE Certification with the Office of Diversity and Inclusion.

Name of Applicant Business:	Business Phone:
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Check One: Single Individual Married Individual

Name:

Residence Address:	Residence Phone:
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Assets		Liabilities	
Cash on hand in Banks	\$	Accounts Payable (Describe in Section 7)	\$
Savings Accounts	\$	Notes Payable to Bank and Others (Describe in Section 2)	\$
IRA & Other Retirement Account (Complete Section 9)	\$	Installment Account (Auto)	\$
Accounts & Notes Receivable	\$	Installment Account (Other)	\$
Life Insurance – Cash Surrender Value Only	\$	Loan on Life Insurance	\$
Stocks and Bonds (Describe in Section 3)	\$	Mortgage on Real Estate (Describe in Section 4)	\$
Real Estate (do not include primary residence from Section 4)	\$	Unpaid Taxes (Describe in Section 6)	\$
Automobile – Present Value	\$	Other Liabilities (Describe in Section 7)	\$
Other Personal Property	\$	Other Liabilities (Describe in Section 7)	\$
Other Assets	\$		
Total Assets	\$	Total Liabilities	\$

Adjusted Personal Net Worth	\$
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Section 1. Source of Income (Prior Year)	Contingent Liabilities
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Salary	\$	As Endorser or Co-Maker	\$
Gross Investment Income	\$	Legal Claims & Judgments	\$
Gross Real Estate Income	\$	Provisions for Federal Income Tax	\$
Other Income (Describe below)*	\$	Other Special Debt	\$

Description of Other Income in Section 1

**Alimony or child support payments need not be disclosed in "Other Income" unless is desired to have such payments counted toward total income.*

Section 2. Notes Payable to Banks and Others
Use attachments if necessary. Each attachment must be identified as part of this statement and signed.

Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amt	Frequency	How Secured
	\$	\$	\$		

Section 3. Stocks and Bonds
Use attachments if necessary. Each attachment must be identified as part of this statement and signed.

No. of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value
		\$	\$		\$

Section 4. Real Estate Owned. List each parcel separately. DO NOT include primary residence.
Use attachments if necessary. Each attachment must be identified as part of this statement and signed.

	Primary Residence*	Property B	Property C	Property D
Type of Property				
Address				
Date Purchased				
Original Cost	\$	\$	\$	\$
Present Market Value	\$	\$	\$	\$
Name & Address of Mortgage Holder				
Mortgage Account No.				
Mortgage Balance	\$	\$	\$	\$
Amount of Payment per Year	\$	\$	\$	\$
State of Mortgage				

****Do not include primary residence in calculations on first page of the Personal Net Worth Worksheet***

Section 5. Other Personal Property and Other Assets.

Describe, and if any is pledged security, state name and address of lien holder, amount of lien, terms of payment and if delinquency. Ownership interest in affiliate firms must be included. Use attachments if necessary. Each attachment must be identified as part of this statement and signed.

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Section 6. Unpaid Taxes.

Describe in detail Use attachments if necessary. Each attachment must be identified as part of this statement and signed.

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Section 7. Other Liabilities.

Describe in detail Use attachments if necessary. Each attachment must be identified as part of this statement and signed.

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Section 8. Life Insurance Held.

Describe in detail Use attachments if necessary. Each attachment must be identified as part of this statement and signed.

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Section 9. Other Assets.

Describe in detail Use attachments if necessary. Each attachment must be identified as part of this statement and signed.

Type of Account	Current Face Value	Minus Any Penalties	Current Value if Withdrawn Today
	\$	\$	\$

Authorization.

Signature:	Date:	Social Security Number: (enter numerals only)
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