



# Financial Statement for Individuals \*

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

1. Your name and address (including zipcode and county)		2. Home phone number	3. Marital status
Zip Code	County	4. Social Security Numbers (optional)	a. Yours b. Spouse

## Section I Employment Information

5. Present employer or business (name and address)		6. Business phone number	7. Occupation
5a. How long at present employment.			8. Check appropriate box <input type="checkbox"/> Wage earner <input type="checkbox"/> Partner <input type="checkbox"/> Sole proprietor <input type="checkbox"/> Corporate officer
9. Spouse's employer or business (name and address)		10. Business phone number	11. Occupation
9a. How long at present employment.			12. Check appropriate box <input type="checkbox"/> Wage earner <input type="checkbox"/> Partner <input type="checkbox"/> Sole proprietor <input type="checkbox"/> Corporate officer

## Section II. Personal Information

13. Name, address and telephone number of next of kin or other reference

14. Date of birth	a. Yours	b. Spouse's	
-------------------	----------	-------------	--

## Section III. General Financial Information

15. Last three years Federal and state income tax returns filed	15a. Adjusted gross income on returns, per year	15b. List all states these returns were filed in:
---	---	---

16. Bank accounts (include Savings & Loans, Credit Unions, IRA and Retirement Plans, Certificates of Deposit, etc.)

Name of Institution	Address	Type of Account	Account No.	Balance

**Total (Enter in Item 25)** ▶

\* This information is requested pursuant to Section 104(e) of the Comprehensive Environmental Response, Compensation and Liability Act, 42 U.S.C. § 9604, and is not subject to approval of the Paperwork Reduction Act of 1980, 44 U.S.C. § 3501, et seq.

**Section III - continued**

**General Financial Information**

17. Charge cards, Lines of credit

Type of Account or Card	Name and Address of Financial Institution	Monthly Payment	Credit Limit	Amount Owed	Credit Available
<b>Totals (Enter in Item 31)</b>		▶			

18. Safe deposit boxes rented or accessed (List all locations, box numbers, and contents including estimated market value)

19. Real Property (Brief description of property and type of ownership)	Address (Include county, state and parcel number)
a.	
b.	
c.	

20. Insurance Policies (Name of Company)	Policy Number	Type	Face Amount	Available Loan Value
<b>Total (Enter in Item 27)</b>				▶

21. Additional Financial Information (Court and administrative proceedings by or against you, legal claims[whether asserted or not], settlement agreements, employment agreements, consulting and similar agreements, "golden parachute" agreements, bankruptcies, repossessions, recent transfers of assets for less than full value, anticipated increases in income, real estate being purchased under contract, real or personal property being held on your behalf, condition of health, information on trusts, estates, profit-sharing plans, inheritance, etc., in or of which you are a participant or beneficiary).

22. Are you currently receiving retirement benefits as a former civilian or military employee of the federal government? If so, give dates of service, agency or branch of service employed by, and location of employment.

23. Indicate any business entity with which you own five (5) percent or more of the outstanding stock (or other equity interest).

Name of Business Entity	Address	Percentage of Stock	Date Purchased

**Section IV.**

**Asset and Liability Analysis**

Description	Current Market Value	Liabilities Balance Due	Equity in Asset	Amount of Monthly Payment	Name and Address of Issuer or Lien/Note Holder/Obligee	Date Pledged	Date of Final Payment
24. Cash and precious metals or gems							
25. Bank accounts							
26 a. Stocks							
b. Bonds							
c. Mutual Funds, Partnership Interest, Securities and other Investments							
27. Cash or loan value of Insurance.							
28. Vehicles (Model, year, license)							
a.							
b.							
c.							
29. Real property (From item 19)							
a.							
b.							
c.							
30. Other tangible assets (including art, boats, jewelry, options, etc.) or financial debts owed to you in excess of \$1000.							
a.							
b.							
c.							
d.							
31. Bank revolving credit							
32. Other Liabilities (Include judgements, notes, tax liens, etc.)							
a.							
b.							
c.							
d.							
e.							
f.							
g.							
33. Federal and state Taxes Owed							
34. <b>Totals</b>			\$	\$	Enter in item 49		

List all transfers real & personal property, including cash (by gift or loan made not at fair market terms) that you have made within the last 3 years (items with a current market value of \$1000.00 or more):

Date	Current Market Value	Sale Price You Received (if any)	Description of Property Transferred	To Whom (Indicate relationship to you)	Nature and Conditions of Transfer

**Section V.**

**Monthly Income and Expense Analysis**

Income			Necessary Living Expenses	
Source	Gross	Net		
35. Wages/Salaries	\$	\$	47. Rent (Do not show mortgage listed in item 29)	\$
36. Wages/Salaries ( <i>spouse</i> )			48. Groceries (no. of people ____ )	
37. Sales Commissions			49. Installment payments	
38. Interest - Dividends			50. Utilities (Gas \$ _____ Water \$ _____	
39. Net business income			Electric \$ _____ Phone \$ _____ )	
40. Rental income			51. Transportation	
41. Pension/Social Security income			52. Insurance (Life \$ _____ Health \$ _____	
42. Pension/Social Security income ( <i>spouse</i> )			Home \$ _____ Car \$ _____ )	
43. Child Support			53. Medical ( <i>describe if in excess of \$500.00</i> )	
44. Alimony			54. Estimated tax payments ( <i>if self-employed</i> )	
45. Other Income ( <i>e.g. investment income, capital gains</i> )			55. Other expenses ( <i>specify</i> )	
46. <b>Total</b>	\$	\$	56. <b>Total</b>	\$

**Certification**

**Under penalties of perjury, I declare that to the best of my knowledge and belief this statement of assets, liabilities, and other information is true, correct, and complete.**

57. Your signature		58. Date
--------------------	--	----------



U.S. Environmental Protection Agency, Region IX  
**Financial Statement for Businesses \***

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

1. Your name and address <i>(including zipcode and county)</i>	1a. Business name and address <i>(including zipcode and county)</i>	2. Business phone number (      )	4. (Check appropriate box)  <input type="checkbox"/> Sole proprietor <input type="checkbox"/> Trust <input type="checkbox"/> Partnership <input type="checkbox"/> Other (specify) _____ <input type="checkbox"/> Corporation      _____
3. Name and address of registered agent <i>(including zipcode and county)</i>			
5. State of Incorporation (or country if foreign)	5a. Employer Identification Number	6. Date of Incorporation	7a. Type of business  7b. SIC Code

8. Information about owner, partners, officers, directors, major shareholder (5% or more stock ownership), other holders of more than 5% equity interest, holders of rights to purchase more than equity interest and other persons with an ability to control.

Name and Title	Effective Date	Home Address	Social Security Number (optional)	Phone Number	Total Shares or Interest

**Section I General Financial Information**

9. Last three years Federal and state income tax returns	Forms Filed	Tax Years ended	Net income before taxes
--	-------------	-----------------	-------------------------

10. Bank accounts *(List all types of accounts including checking, savings, certificates of deposit, etc.)*

Name of Institution	Address	Type of Account	Account No.	Balance
<b>Total (Enter in Item 19)</b>				

11. Bank Credit available *(Lines of credit, etc.)*

Name of Institution	Address	Credit Limit	Amount Owed	Credit Available	Monthly
<b>Totals</b>					

12. Location, box number, and contents of all safe deposit boxes rented or accessed



**Section III - continued**

**General Financial Information on Trust**

15. Charge cards, Lines of credit

Type of Account or Card	Name and Address of Financial Institution	Monthly Payment	Credit Limit	Amount Owed	Credit Available
<b>Totals (Enter in Item 28)</b>					

16. Safe deposit boxes rented or accessed (List all locations, box numbers, and contents including estimated market value)

17. Real Property (Brief description of property and type of ownership)	Address (Include county, state and parcel number)
a.	
b.	
c.	

18. Insurance Policies (Name of Company)	Policy Number	Type	Face Amount	Available Loan Value
<b>Total (Enter in Item 24)</b>				

19. Additional Financial Information (Court and administrative proceedings by or against the Trust, legal claims[whether asserted or not], settlement agreements, employment agreements, consulting and similar agreements, "golden parachute" agreements, bankruptcies, repossessions, recent transfers of assets for less than full value, anticipated increases in income, real estate being purchased under contract, real or personal property being held on behalf of the Trust, condition of health, information on trusts, estates, profit-sharing plans, inheritance, etc., in or of which the Trust is a participant or beneficiary).

20. Indicate any business entity in which the Trust owns five (5) percent or more of the outstanding stock (or other equity interest).

Name of Business Entity	Address	Percentage of Stock	Date Purchased

**Section IV.**

**Asset and Liability Analysis**

Description	Current Market Value	Liabilities Balance Due	Equity in Asset	Amount of Monthly Payment	Name and Address of Issuer or Lien/Note Holder/Obligee	Date Pledged	Date of Final Payment
21. Cash and precious metals or gems							
22. Bank accounts							
23 a. Stocks							
b. Bonds							
c. Mutual Funds, Partnership Interest, Securities and other Investments							
24. Cash or loan value of Insurance.							
25. Vehicles (Model, year, license)							
a.							
b.							
c.							
26. Real property (From item 17)							
a.							
b.							
c.							
27. Other tangible assets (including art, boats, jewelry, options, etc.) or financial debts owed to the Trust in excess of \$1000.							
a.							
b.							
c.							
d.							
28. Bank revolving credit							
29. Other Liabilities (Include judgements, notes, tax liens, etc.)							
a.							
b.							
c.							
d.							
e.							
f.							
g.							
30. Federal and state Taxes Owed							
31. <b>Totals</b>			\$	\$	Enter in item 39		

List all transfers real & personal property, including cash (by gift or loan made not at fair market terms) to or from the Trust within the last 3 years (items with a current market value of \$1000.00 or more):

Date	Current Market Value	Sale Price Trust Received (if any)	Description of Property Transferred	To Whom (Indicate relationship to the Trust)	Nature and Conditions of Transfer



**Section V.**

**Monthly Income and Expense Analysis of Trust Fund**

Income			Necessary Expenses	
Source	Gross	Net		
32. Interest - Dividends	\$	\$	37. Trustee service fees	\$
33. Net business income			38. Rent (Do not show mortgage listed in item 26)	
34. Rental income			39. Installment payments	
35. Other Income (e.g. investment income, capital gains -- specify type)			40. Utilities (Gas \$ _____ Water \$ _____	
			Electric \$ _____ Phone \$ _____ )	
			41. Transportation	
			42. Insurance (specify type)	
			43. Other expenses (specify)	
36. <b>Total</b>	\$	\$	44. <b>Total</b>	\$

**Certification**

**Under penalties of perjury, I declare that to the best of my knowledge and belief this statement of assets, liabilities, and other information is true, correct, and complete.**

45. Your signature	46. Date
--------------------	----------

**Section I - continued**

**General Financial Information**

13. Real property

Brief Description and Type of Ownership	Address (include county, state and parcel number)
a.	
b.	
c.	

14. Insurance policies owned with business as beneficiary

Name Insured	Company	Policy Number	Type	Face Amount	Available Loan Value
<b>Total (Enter in Item 21)</b>				▶	

15. Additional Information (Court and administrative proceedings by or against the business, settlement agreements, agreements to purchase or sell tangible or financial assets other than in the ordinary course of business, legal claims [whether asserted or not], bankruptcies, repossessions, recent transfers of assets for less than full value, anticipated increases in income, options to buy or sell real or personal property, real or personal property being purchased under contract, real or personal property being held on behalf of the business).

15a. List all subsidiaries owned, joint ventures, partnerships and other entities controlled by the business. Provide current market value of the business' interest in such subsidiary or other entity.

16. Federal government departments or agencies with whom you have a contract for payment of goods or services

Agency Name	Address	Contract No.	Amount to be Received	Payment Due Date

16a. Federal government departments or agencies that have extended or given the business loans, grants or assistance, or to which you have applied (or anticipate applying for any loan, grant, or assistance) in the past 5 years.


17. Accounts/Notes receivable (Include loans to stockholders, officers, partners, etc.)

Agency Name	Address	Amount Due	Due Date	Status
<b>Total (Enter in Item 20)</b>				▶

**Section II.**

**Asset and Liability Analysis**

Description (a)	Cur. Mkt Value (b)	Liabilities Bal. Due (c)	Equity in Asset (d)	Amount of Mo. Pymt. (e)	Name and Address of Lien/Note Holder/Obligee (f)	Date Pledged (g)	Date of Final Pymt. (h)
18. Cash on hand							
19. Bank accounts							
19a. Securities and other financial assets owned							
20. Accounts/Notes receivable							
21. Insurance Loan Value							
22. Real property (from item 13)		a.					
		b.					
		c.					
		d.					
23. Vehicles (Model, year, license)		a.					
		b.					
		c.					
24. Machinery and equipment (Specify)		a.					
		b.					
		c.					
25. Merchandise inventory (Specify)		a.					
		b.					
26. Other Assets (including permits, licenses, tax loss carry forwards, agreements not to compete, other contracts) (Specify)		a.					
		b.					
		c.					
		d.					
27. Other Liabilities (Include judgements, notes, tax liens, etc.)		a.					
		b.					
		c.					
		d.					
		e.					
28. Federal & State Taxes Owed							
<b>29. Totals</b>							

