STATE OF MAINE MAINE REVENUE SERVICES

PERSONAL FINANCIAL STATEMENT Contact: Case#:

Instructions on Page 4

Taxpayer's name and address			Spouse's name and address				
SSN D	ate of birth		SSN	Date of birth			
Home phone #	ell phone #		Home phone #	Cell phone #			
r			r				
Employer			Employer				
Employer			Employer				
Business phone # Occupation	Ном	v long employed?	Business phone # O	ecupation	How long employed?		
Business phone # Occupation	1100	v long employeu:	Business phone # Occupation How long employed?				
Pay period: Weekly Bi-weekly Mont	hly Other		Pay period: Weekly Bi-weel	kly Monthly Other			
Highest level of education attained?			Highest level of education attai	nad?			
riighest level of education attained:			ringuest level of education attai	meu:			
1 14 1 6 4 1	1 111/	1 1 10 1					
Age and relationship of others living in yo	our nousenoia (exclude self and spouse)					
		Α.6	SSETS				
			Accounts				
	share and share	draft accounts, similar de	eposit accounts on banks and cre-	dit unions)(add separate sheet	t if needed)		
Name of institution	City	У	Type of account	Account #	Balance		
G. W.	~ 1 T. 6	G 111 F 6 D	1 0 1111 101		1		
Credit Cards, Lines of Credit, Loans from Ba							
Name of institution	Type of a	ccount	Credit limit	Amount owed	Monthly payment		
Pen			ension Plans				
Account holder (employer, funds man	ager, etc)	Type of pension (401K, IRA, employer, etc)	Loan value	Total value		
					+		
		Dool	Property	1	_1		
Property 1: Brief description		Ktai	Property location (town & co	ountry)			
Property 1: Brief description			Property location (town & co	ounty)			
Mortgage holder	Estimated m	arket value	Amount owed	Payments remaining	Monthly payment		
Property 2: Brief description	I		Property location (town & co	ounty)	1		
· Paral a management			- I - F - I - J - I - I - I - I - I - I - I - I	- · · - J /			
	Tea.			T-5	1		
Mortgage holder	Estimated m	arket value	Amount owed	Payments remaining	Monthly payments		
				<u> </u>	<u> </u>		
Property 3: Brief description			Property location (town & county)				
			Property location (town & co	ounty)			
			Property location (town & co	ounty)			
Mortgage holder	Estimated m	arket value			Monthly payments		
Mortgage holder	Estimated m	arket value	Property location (town & co	Payments remaining	Monthly payments		

Taxpayer Na	ame:				SSN:					
					ASSETS ((continued)				
				Stocks, Bond		unds and Other Securities				
Ty	pe	W	here located	Stocks, Bond	Owner of record			Current value		
						surance	_			
Na	ame of compa	ny	Policy nu	ımber	Cash surrender value		Loan value			
					Veh	nicles				
Year	Make	e & model	Owned o	or leased?	Lien/leaseholder An			Amount owed Monthly payment		
						ctibles		T =		
Description of items collected			Location of collection				Estimated value of collection			
					Other	Assets				
Income tax re	efunds	Average annu	ıal federal refund			Anticipa	ated current yea	r refunds		
					Federal			State		
		s, riding lawnmo	owers, farm or co	nstruction equi						
Item description Location		Lien hold		r	Current value		Amount owed			
Other propert	ty not listed ab	oove					•			
Item description Location		Location		Lien holde	Lien holder		e	Amount owed		
LIABILITIES										
Federal Tax Debts										
Tax type Amount owed Monthly payment										
Do you have	an offer-in-co		S? ing with the IRS? pending with the		s No					
				N	on-Maine S	tate Tax Debts				
Tax type Amount owed			Monthly payment To which st			state is this debt owed?				
Do you have	an offer-in-co		's courts? ing with that state pending with that		s No					
					Lo	eans				
		ot listed anywh					ı			
Source of loan (financial institution, family, friend, etc) Amount owe		ed Monthly payment Did you sign a writte		a written agre	tten agreement for this loan?					

Trace Property Employer How often paid? Gross pay per pay period (before deductions) Employer How often paid? Gross pay per pay period (before deductions) Employer Face paid? Gross pay per pay period (before deductions) Face payers of primary job	Taxpayer's Name:		SS	N					
Populary			INC	COME					
Employer How offices pairs Gross pay per pay period (before deductions)			Wages a	nd Salaries					
Trappyer's primary job Sposse's secured jub Sposse'	Do	o not enter income from your bu	isiness here.	See instructions of	on page 4. Mu	st attach pay st	ub.		
Trappyer's second job Sposes's primary job Sposes's primary job Resident Income See instructions on page 4. Business owner: Average monthly set sizeone See instructions on page 4. Resident Income See		Employer	How often	paid?	Gross pay po	er pay period (l	efore deduction	ons)	
Sprouse's primary job Sprouse's second job Businestance Sea instructions on page 4. State St	Taxpayer's primary job								
Business owner: Average monthly net income See instructions on page 4. Business from: Average monthly net income Restal Income See instructions on page 4. Popeary Monthly gental income	Taxpayer's second job								
Poperty									
Business owner: A verage monthly net income Gederal State State	Spouse's second job								
Residuation									
Renial Income See instructions on page 4.	Business owner:	Average monthly net income			Quarte	rly estimated in	l income tax payments		
Property							State		
Miscellaneous Income									
Total monthly pension income Workers' compensation (total received monthly) Child support received monthly Alimony received monthly Installment payments received monthly Other monthly income EXPENSE Include the average amount spent each month in each entegory listed. Do not include expenses shown in any of the categories on pages 1 or 2. Category Monthly expense Category Monthly expense Expense Include the average amount spent each month in each entegory listed. Do not include expenses shown in any of the categories on pages 1 or 2. Category Monthly expense Expense Category Monthly expense Category Monthly expense Expense Category Monthly expense Category Monthly expense Category Monthly expense S Category Monthl	Property	Monthly rental income							
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Workers' compensation (total received monthly) Child support received monthly Installment payments received monthly (loans, installment sales, etc) Installment payments received monthly (loans, installment sales, etc) Social security income (monthly) Public assistance payments received monthly (loans, installment sales, etc) Social security income (monthly) EXPENSES Include the average amount spent each month in each category listed. Do not include expenses shown in any of the categories on pages 1 or 2. Category Monthly expense Category Monthly				Taxpayer		Spouse		Dependent's income	
Child support received monthly Alimony received monthly Installment payments received monthly (loans, installment sales, etc) Social security income (monthly) Public assistance payments received monthly Other monthly income EXPENSES	•	onth lv							
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Chief monthly income EXPENSES		hlv							
Include the average amount spent each month in each category listed. Do not include expenses shown in any of the categories on pages 1 or 2. Category Monthly expense Category Monthly expense Rent or mortgage payment \$ Groceries \$ S Utility expense \$ Transportation expense \$ S Un-reimbursed medical expense \$ Un-reimbursed child care expense \$ S Un-reimbursed child care expense \$ S Alimony paid \$ Other necessary expenses \$ S In Do you have lawsuits currently pending? Yes No 1. Do you have lawsuits currently pending? Yes No 3. Have you had property repossessed recently? Yes No 4. Have you had a recent sale or other transfer of assets for less than full value? Yes No 5. Are you anticipating increases in income in the next 12 months? Yes No 6. Are you a participant or beneficiary of a trust, estate, profit sharing or expected inheritance? Yes No Inder penalties of perjury, I (we) declare that to the best of my (our) knowledge and belief this statement of assets, liabilities and other financial information is true, correct and complete. I (we) hereby authorize Maine Revenue Services to obtain a complete and current credit report from any credit reporting agency to confirm certain information contained in this financial statement.									
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Un-reimbursed medical expense \$ Un-reimbursed child care expense \$ Health insurance \$ Child support paid (actual payment made) \$ Alimony paid \$ Other necessary expenses \$ S OTHER FINANCIAL INFORMATION Circle the applicable answers below and attach a separate sheet with details for each question answered "yes". 1. Do you have lawsuits currently pending? Yes No 2. Have you had property repossessed recently? Yes No 3. Have you declared bankruptcy in the last 10 years? Yes No 4. Have you had a recent sale or other transfer of assets for less than full value? Yes No 5. Are you anticipant or beneficiary of a trust, estate, profit sharing or expected inheritance? Yes No 7. Do you have insurance settlements pending? Yes No Under penalties of perjury, I (we) declare that to the best of my (our) knowledge and belief this statement of assets, liabilities and other financial information is true, correct and complete. I (we) hereby authorize Maine Revenue Services to obtain a complete and current credit report from any credit reporting agency to confirm certain information contained in this financial statement.	Utility expense			Transportation expense					
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Taxpayer's Signature Date Spouse's Signature Date	complete. I (we) hereby authorize Maine								
	Taxpayer's Signature	Date		Spouse's Sign	nature			Date	