

STATE OF MAINE MAINE REVENUE SERVICES		PERSONAL FINANCIAL STATEMENT			Instructions on Page 4						
		Contact:		Case#:							
Taxpayer's name and address				Spouse's name and address							
SSN				Date of birth		SSN		Date of birth			
Home phone #				Cell phone #		Home phone #		Cell phone #			
Employer				Employer							
Business phone #		Occupation		How long employed?		Business phone #		Occupation		How long employed?	
Pay period: Weekly __ Bi-weekly __ Monthly __ Other _____				Pay period: Weekly __ Bi-weekly __ Monthly __ Other _____							
Highest level of education attained?				Highest level of education attained?							
Age and relationship of others living in your household (exclude self and spouse)											
ASSETS											
Bank Accounts											
(Savings, checking, CDs, share and share draft accounts, similar deposit accounts on banks and credit unions)(add separate sheet if needed)											
Name of institution			City		Type of account		Account #		Balance		
Credit Cards, Lines of Credit, Loans from Banks, Credit Unions and Other Financial Institutions											
Name of institution			Type of account		Credit limit		Amount owed		Monthly payment		
Pension Plans											
Account holder (employer, funds manager, etc)				Type of pension (401K, IRA, employer, etc)			Loan value		Total value		
Real Property											
Property 1: Brief description					Property location (town & county)						
Mortgage holder			Estimated market value		Amount owed		Payments remaining		Monthly payment		
Property 2: Brief description					Property location (town & county)						
Mortgage holder			Estimated market value		Amount owed		Payments remaining		Monthly payments		
Property 3: Brief description					Property location (town & county)						
Mortgage holder			Estimated market value		Amount owed		Payments remaining		Monthly payments		

Taxpayer Name:		SSN:			
ASSETS (continued)					
Stocks, Bonds, Mutual Funds and Other Securities					
Type	Where located	Owner of record	Current value		
Life Insurance					
Name of company	Policy number	Cash surrender value	Loan value		
Vehicles					
Year	Make & model	Owned or leased?	Lien/leaseholder	Amount owed	Monthly payment
Collectibles					
Description of items collected		Location of collection		Estimated value of collection	
Other Assets					
Income tax refunds	Average annual federal refund	Anticipated current year refunds			
		Federal		State	
Boats, snowmobiles, ATVs, riding lawnmowers, farm or construction equipment					
Item description	Location	Lien holder	Current value	Amount owed	
Other property not listed above					
Item description	Location	Lien holder	Current value	Amount owed	
LIABILITIES					
Federal Tax Debts					
Tax type	Amount owed	Monthly payment			
Is this debt currently under levy by the IRS? Yes No Do you have an offer-in-compromise pending with the IRS? Yes No Do you have a petition for reconsideration pending with the IRS? Yes No					
Non-Maine State Tax Debts					
Tax type	Amount owed	Monthly payment	To which state is this debt owed?		
Is debt currently under collection in Maine's courts? Yes No Do you have an offer-in-compromise pending with that state? Yes No Do you have a petition for reconsideration pending with that state? Yes No					
Loans					
List all outstanding loans not listed anywhere above					
Source of loan (financial institution, family, friend, etc)	Amount owed	Monthly payment	Did you sign a written agreement for this loan?		

Taxpayer's Name:		SSN	
INCOME			
Wages and Salaries			
Do not enter income from your business here. See instructions on page 4. Must attach pay stub.			
Taxpayer's primary job	Employer	How often paid?	Gross pay per pay period (before deductions)
Taxpayer's second job			
Spouse's primary job			
Spouse's second job			
Business Income			
See instructions on page 4.			
Business owner:	Average monthly net income	Quarterly estimated income tax payments	
		Federal	State
Rental Income			
See instructions on page 4.			
Property	Monthly rental income		
Miscellaneous Income			
	Taxpayer	Spouse	Dependent's income
Total monthly pension income			
Workers' compensation (total received monthly)			
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			
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	\$
Utility expense	\$	Transportation expense	\$
Un-reimbursed medical expense	\$	Un-reimbursed child care expense	\$
Health insurance	\$	Child support paid (actual payment made)	\$
Alimony paid	\$	Other necessary expenses	\$

OTHER FINANCIAL INFORMATION

Circle the applicable answers below and attach a separate sheet with details for each question answered "yes".

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|---|-----|----|
| 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 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 |
| 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.

Taxpayer's Signature

Date

Spouse's Signature

Date