DECLARATION OF DEFENDANT OR OFFENDER NET WORTH & CASH FLOW STATEMENTS

I,, residing at,
in the city (or county) of, in the state of,
have completed the attached Net Worth Statement (Prob. Form 48) or Net Worth Short Form Statement (Prob.
Form 48EZ) and/or Cash Flow Statement (Prob. Form 48B) that fully describe my financial resources, including a
complete listing of all assets owned or controlled by me as of this date and any transfers or sales of assets since my arrest.
The Cash Flow Statement (Prob. Form 48B) also includes my financial needs and earning ability and the financial needs
and earning ability of my spouse (or significant other) and my dependent(s) living at home.
Net Worth Statement (Total pages, including additional pages)
Net Worth Statement (Total pages, including additional pages) Net Worth Short Form Statement (Total pages, including additional pages)
Cash Flow Statement (Total pages, including additional pages)
_
I declare under penalty of perjury that the foregoing is true and correct; or
False statements may result in revocation of supervision, in addition to possible prosecution under the provisions of 18 U.S.C. § 1001, which carries a term of imprisonment of up to 5 years and a fine of up to \$250,000, or both.
(Defendant Signature)
Executed on
day of

Last Name	First Name	Middle Name	Social Security Number

Instructions for Completing Monthly Cash Flow Statement

Having been convicted in the United States District Court, you are required to prepare and file with the probation officer a statement fully describing your financial resources, including a complete listing of all monthly cash inflows and outflows.

If you are placed on probation or supervised release (or other types of supervision), you may be periodically required to provide updated information fully describing your financial resources and those of your spouse, significant others, or dependents, as described above, to keep a probation officer informed concerning compliance with any condition of supervision, including the payment of any criminal monetary penalties imposed by the court (see 18 U.S.C. § 3603).

Amendments were made to 18 U.S.C. §§ 3663 (a)(1)(B)(i), 3664(d)(3), and 3664(f)(2), and Rule 32(b)(4)(F) to clarify that the assets owned, jointly owned, or controlled by a defendant; liabilities, and the financial needs and earning ability of a defendant and a defendant's dependents are all relevant to the court's decision regarding a defendant's ability to pay. Your Cash Flow Statement should include assets or debts that are yours alone (I-Individual), assets or debts that are jointly (J-Joint) held by you and a spouse or significant other, assets or debts that are held by a spouse or significant other (S-Spouse or Significant Other) that you enjoy the benefits of or make occasional contributions toward, and assets or debts that are held by a dependent (D-Dependent) living in your home that you enjoy the benefits of or make occasional contributions toward.

Please complete the Monthly Cash Flow Statement in its entirety. You must answer "None" to any item that is not applicable to your financial condition. Attach additional pages if you need more space for any item. All entries must be accompanied by supporting documentation (see Request for Cash Flow Statement Financial Records (Prob. 48C)). Initial and date each page (including any attached pages) and sign and date the last page of the Cash Flow Statement.

Last Name -

MONTHLY CASH FLOW STATEMENT

Monthly Cash Inflows

Defendant	Gross	Net						
Your Salary/Wages (List both monthly gross earnings and take-home pay after payroll deductions.)								
Your Cash Advances (List all payroll advances or other advances from work.)								
Your Cash Bonuses (List all payments from work in addition to your salary that are not an advance.)								
Commissions (List all non-employee earnings as an independent contractor.)								
Business Income (List both monthly gross income and net income after deducting expenses.)								
Interest (List all interest earned each month.)								
Dividends (List all dividends earned each month.)								
Rental Income (List all monthly income received from real estate properties owned.)								
Trust Income (List all trust income earned each month.)								
Alimony/Child Support (List all alimony or child support payments received each month.)								
Social Security (List all payments received from Social Security.)								
Other Government Benefits (List all amounts received from the government not yet reported (e.g., Aid to Families with Dependent Children.)								
Pensions/Annuities (List all funds received from pensions and annuities each month.)								
Allowances-Housing/Auto/Travel (List all funds received from housing allowances, auto allowances, travel allowances, and any other kind of allowance.)								
Gratuities/Tips (List all gratuities and tips received each month from any and all sources.)								
Spouse/Significant Other Salary/Wages (List all gross and net monthly salary and wages received by your spouse or significant other.)								
Other Joint Spousal Income (List any monthly income jointly earned with your spouse or significant other [e.g., any income from spouse or income from a business owned or operated by the spouse that you have a joint ownership interest in or control]).								
Income of Other In-House (List all monthly income of others living in the household or the monthly amount actually paid for household bills by these persons.)								
Gifts from Family (List all amounts received as gifts from family members each month.)								
Gifts from Others (List all gifts received from any sources not yet reported.)								
Loans from Your Business (List all loan amounts received each month from all businesses owned or controlled by you.)								
Mortgage Loans (List all amounts received each month from mortgage loans owed to you.)								
Other Loans (List all other loan amounts received each month not yet reported.)								
Other (specify) (List all other amounts received each month not yet reported.)								
TOTALS								

Signature

Last Name -	
Necessary Monthly Cash Outflows	
	Amount
Rent or Mortgage (List monthly rental payment or mortgage payment.)	
Groceries (List the total monthly amount paid for groceries and number of people in your household.) #	
Utilities (List the monthly amount paid for electric, heating oil/gas, water/sewer, telephone, and basic cable.)	
Electric	
Heating Oil/Gas	
Water/Sewer	
Telephone	
Basic Cable (no premium channels)	
Transportation (List monthly amount paid for gasoline, motor oil, necessary auto repairs, or the cost of public transportation.)	
Insurance (List the monthly amount paid for auto, health, homeowner/rental, and life insurance.)	
Auto	
Health	
Homeowner/Rental	
Life	
Clothing (List the monthly amount actually paid for clothing.)	
Loan Payments (List all monthly amounts paid toward verified loans, other than loans to family members, which are non-allowable expenses.)	
Credit Card Payments (List all monthly credit card or charge card payments.)	
Medical (List all monthly payments for necessary medical care or treatment.)	
Alimony/Child Support (List all alimony or child support payments made each month.)	
Co-payments (List the total monthly payments made for electronic monitoring and drug and mental health treatment.)	
Other (specify) (List all other necessary monthly amounts paid each month not yet reported.)	
Other Factors That May Affect Monthly Cash Flow (Describe)	
TOTAL	
NET MONTHLY CASH FLOW: \$ (CASH INFLOWS LESS NECESSARY CASH OUTFLOWS)	
MONTHLY CRIMINAL MONETARY PENALTY PAYMENT: \$	
PROSPECT OF INCREASE IN CASH INFLOWS (Give a general statement of the prospective increase of the value of any cash inflows repo	rted.)
	·

Date ___

Last Name	First Name	Middle Name	Social Security Number		

Instructions for Completing Net Worth Statement

Having been convicted in the United States District Court, you are required to prepare and file with the probation officer an affidavit fully describing your financial resources, including a complete listing of all assets you own or control as of this date and any assets you have transferred or sold since your arrest. Amendments were made to 18 U.S.C. §§ 3663(a)(1)(B)(i), 3664(d)(3), and 3664(f)(2), and Rule 32(b)(4)(F) to clarify that the assets owned, jointly owned, or controlled by a defendant, and liabilities are all relevant to the court's decision regarding the ability to pay. Your Net Worth Statement should include assets or debts that are yours alone (I-Individual), assets or debts that are jointly (J-Joint) held by you and a spouse or significant other, assets or debts that are held by a spouse or significant other (S-Spouse or Significant Other) that you enjoy the benefits of or make occasional contributions toward, and assets or debts that are held by a dependent (D-Dependent) that you enjoy the benefits of or make occasional contributions toward.

If you are placed on probation or supervised release (or other types of supervision), you may be periodically required to provide updated information fully describing your financial resources and those of your dependents, as described above, to keep a probation officer informed concerning compliance with any condition of supervision, including the payment of any criminal monetary penalties imposed by the court (see 18 U.S.C. § 3603).

Please complete the Net Worth Statement in its entirety. You must answer "None" to any item that is not applicable to your financial condition. Attach additional pages if you need more space for any item. All entries must be accompanied by supporting documentation (see Request for Net Worth Statement Financial Records (Prob. 48A)). Initial and date each page (including any attached pages). Also, sign, date, and attach the Declaration of Defendant or Offender Net Worth & Cash Flow Statements (Prob. 48D).

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T	oct	Name	_

NET WORTH STATEMENT

NOTE: I = Individual J = Joint S = Spouse/Significant Other D = Dependent

		OUNTS (Include all personal OGH accounts, Thrift Savings,		ASSETS ocking and savings	accounts, credit u	inions, n	noney mar	kets, certi	ificates	of deposit,
	I/J S/D	Name of Institution		ldress	Type of Account	Account Number		Personal or Commercial		Balance
Section A										
		RITIES (Include all stocks in Government securities, etc.)	n public corporation	ns, stocks in busine	esses you own or l	have an	interest in,	bonds, n	nutual f	unds,
	I/J S/D	Name and Kind of	Security	Locatio	on of Security		Numb Uni		Fa	ir Market Value
n B										
Section B										
	MON	EY OWED TO YOU BY O	THEDS (Include al	I money eyed to y	ou by any parson	or ontit	w.)			
7.)	I/J S/D	Name and Address of Debtor	Amount Owed to You	Reason Owed to You	Date Money Loaned	Relate to I	tionship Debtor any)	Mon Payn or D Fu Payn Expe	nent Pate Ill nent	Is Debt Collectible ?
Section C										
							Initials	<u> </u>	Date	

Initials	Date	

Initials _____ Date ____

Last	Name) -													
		INSURANCE (Include type of polic der value [the value of the investment							[the	stated amou	int of cove	rage] and	cash		
Section D	I/J S/D	Name and Address of Company and Name of Beneficiary	Policy Number	a whole	Type	Type of Face Policy Amount		Cash Surrender Value		Amount Borrowed		Amount You Can Borrow			
							-								
		DEPOSIT BOXES OR STORAGE ccess to in which others are holding a						depos	sit bo	xes or stora	ge space yo	ou rent or	places you		
ſτÌ	I/J S/D	Name and Add of Box or Facility L					x Num or Spac			Conter	nts	Fair N	Iarket Value		
Section E															
S.															
Section F	MOT	OR VEHICLES (Include all cars, tru	cks, mobile	e homes	, moto	rcycle	s, all te				rplanes, et	c.)			
	I/J S/D	Year, Make & License Number/Vehicle Identification Number	Milea	ige	e Loan/Le Baland (if any		ce	Date Loan/Leas Will be Paid Of or Ends		Paid Off	Monthly Payment		Fair Market Value		
3 1															
	DEAL	ESTATE (Include property, parcels	lots times	horos s	and da	valona	d land v	with b	uildir	age)					
rh	I/J S/D	Real Estate Address (include county and state)/ Mortgage Company		Purchase Pu		urchase Purchase		ase	Mortgage Balance			Date Mortgage Will be Paid	Mon Payn	-	Fair Market Value
Section G		or Lien Holder								Off					
01															
	MOD'	TGAGE LOANS OWED TO YOU	(Include no	uma add	drass	and rel	ationshi	in lif s	nv1 t	to the morte	agaa [tha n	varty that	bought the		
	real es	tate you sold and is making payments	to you].)												
n H	I/J S/D	Mortgagee (name & address) Relationship to Mortgagee	/	Mortgage Balance		Date Mortgage Will be Paid Off			Balloon Payment? If Yes, Date?			nthly ment	Is Debt Collectible?		
Section H								\perp							

<u>Last</u>	Name	<u> </u>								
		ER ASSETS (Include any caghts, patents, etc.)	ash on hand, jewe	lry, art, paintings, co	in collections, st	tamp collections,	collectibles, anti	ques,		
	I/J S/D	Description	Loan Balance (if any)	Date Loan Will be Paid Off	Monthly Payment	Where is A Located		Fair Market Value		
Section I										
		CIPATED ASSETS (Include n plans, inheritance, wills, o					sation or damage	es, profit sharing,		
	I/J S/D	Amount Received or Expected to Receive	Date Expected to Receive	Reason You Ex	•	Name and Ad That Can Veri	ddress of Person fy This (e.g., att stitution, execut	orney, financial		
n J										
Section J					e a grantor or donor [the person who establishes the trust], the trustee or fiduciary eficiary who has or will receive benefits from the trust].)					
	I/J S/D	Name of Trust/ Taxpayer ID#	Value of Trust	Your Annual Incon	ne From Trust	Your I	Interest in Trus	t Assets		
	the las	NESS HOLDINGS (Include t three years; e.g., self-empl a additional pages, if necessa	oyed sole proprie							
W.	<u> </u>		1	Industry of	Date	Capital	Your	Sale Price or		
K	I/J S/D	Name and Address of Business/ Taxpayer I.D.#	Type of Business Entity	Business	Business Started	Investment to Start	Ownership Interest Percentage	Fair Market Value of Your Interest		
Section K		of Business/	Business		Business	Investment	Ownership Interest	Fair Market Value of Your		
Section K		of Business/	Business		Business	Investment	Ownership Interest	Fair Market Value of Your		
Section K		of Business/	Business		Business	Investment	Ownership Interest	Fair Market Value of Your		

Initials _____ Date ____

Last	Name	-						
	INCO	ME TAX RETURNS						
	Type of Income Tax Return Filed			Last Filin	g Year	Years of Last 5 Income Tax Returns You Will Submit to the Probation Officer		
on L	Indivi	dual (Form 1040)						
Section L	Partnership/Limited Liability Company (Form 1065) Corporation (Form 1120)							
	S Corp	poration (Form 1120S)						
		SFER OF ASSETS (Include any e than \$500.00. Also list any asse					your arrest with a cost	or fair market value
	I/J S/D	Description of Asset/ Reason Transferred/Sold	Date of Transfer/S		Original Cost	Amount You Received, if Any	Name of Purchaser or Person Holding the Asset	Sale Price or Fair Market Value at Transfer
Section M								
Secti								
	27.1.2.5					000		
		ES OF SHAREHOLDERS OR P ship interest.)	'ARTNERS (Incl	ude all shareholde	ers, officers, and/o	r partners, indicating e	each respective
		Name of Business			Names o	Ownership Interest Percentage		
Section N								
Secti								

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Last	Last Name -								
	ASSETS YOU WILL LIQUIDATE (Include all assets you intend to liquidate to satisfy any criminal monetary penalties that may be imposed.)								
C	Asset Description	Estimated Value of Asset	Date You Will Liquidate	Current Location of Asset (if real property, county and state)					
Section O									
Se									
	PROSPECT OF INCREASE IN ASSETS (Give a general statement of the prospective increase of the value of any asset you own.)								
n P									
Section P									

Last	Name) -										
	LIABILITIES											
Section A	CHAI	CHARGE ACCOUNTS AND LINES OF CREDIT (Include all bank credit cards, lines of credit, revolving charge accounts, etc.)										
	I/J S/D	Type of Account or Card	Na	me and Address of Creditor		Credit Limit			Credit Available			Minimum Monthly Payment
		ER DEBTS (Include	mortgage lo		le, delinqu				1		-	
	I/J S/D	I/J Owed To		Address		Relationship (if any)		Amount Owed		Reason Owed		Monthly Payment
n B						(many) Owed						
Section B												
												_
	PARTY TO CIVIL SUIT (Include any civil lawsuits you have ever been a party to.)											
Ŋ	I/J S/D			Court of Jurisdiction and County		Case Number	Date of Suit Filed					gment Amount/ npaid Balance
Section C												
Ň												_
	BANKRUPTCY FILINGS (Include information requested for any Chapter 7, 11, or 13 bankruptcy filings you have ever been a party to as an individual or as a business entity.								been a party			
D	I/J S/D	1 7 7		Bankruptcy Court Case of Jurisdiction Number		County and State of Discharge		Date Fil	led	Date of Discharge		
Section D												

Signature	 Date	

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REQUEST FOR MONTHLY CASH FLOW STATEMENT FINANCIAL RECORDS

DEFENDANT'S FULL NAME

DOCKET NUMBER

All entries on the Cash Flow Statement must be accompanied by supporting documentation. Provide the probation officer with all records listed below are applicable to your financial statements, along with your completed Cash Flow Statement by the close of

MONTHLY CASH INFLOWS

Salary/Wages

Copy of all W-2 forms submitted with the prior year income tax return. Copy of all pay stubs for the most recent one-month period.

Cash Advances

Copy of all pay stubs documenting cash advances.

Cash Bonuses

Copy of all pay stubs documenting cash bonuses, and copy of related 1099 form.

Commissions

Copy of all 1099 forms submitted with the prior year income tax return.

Business Income

Copy of the past six monthly financial statements of all businesses owned or controlled by the defendant. Also, be sure to provide all financial information requested in the "Assets" portion of the "Net Worth Statement" under "Section K, Business Holdings."

Interest/Dividends

Copy of most recent earnings statement from a financial institution (e.g., bank, brokerage firm, etc.). Copy of all 1099-INT forms, reporting annual interest earnings, for the past year.

Rental Income

Copy of lease rental agreement, copy of monthly rental check received, and copy of the deposit on the defendant's monthly bank statement.

Trust Income

Copy of the monthly trust income check, copy of the trust agreement, and a copy of the trust income tax return for the prior year.

Alimony/Child Support

Copy of divorce decree, copy of payments received, and statements documenting child support/alimony obligations with payment history.

Social Security

Copy of most recent Social Security check and most recent benefits determination letter.

Other Government Benefits

Copy of most recent government subsidy check (e.g., unemployment compensation, or child support/alimony) and most recent benefits determination letter.

Pensions/Annuities

Copy of pension/annuity check, copy of most recent pension plan activity statement or annuity statement, and copy of pension plan or annuity contract.

Allowances (housing, auto, travel)

Copy of related pay stub, 1099 form for prior year, and possibly a letter from the employer on company letterhead.

Gratuities/Tips

Copy of current month's pay stubs, letter from employer estimating monthly gratuities earned, and W-2 form for the prior year.

Spouse (Significant Other's) Salary/Wages

Copy of all W-2 forms submitted with the prior year income tax return. Copy of all pay stubs for the most recent one-month period.

Other Joint Spousal Income

Documentation verifying any monthly income jointly earned with the spouse or significant other, (e.g., income from the spouse or significant other or income from a business owned or controlled by the spouse or significant other, that the defendant has a joint ownership interest in, or controls).

Income of Others in the Home

Verification of the monthly earnings of all others living in the defendant's household (e.g., all pay stubs for the prior month, W-2 forms, and 1099 forms for the prior year), paid receipts or canceled checks for necessary monthly household expenditures (e.g., for food, room rental, telephone, transportation, etc.) actually paid by this person on behalf of the defendant.

Gifts From Family

A signed and dated statement from the family member who gave gifts to the defendant during the month, listing the amounts, dates and reasons given, and a copy of the check received, if any.

Gifts From Others

A signed and dated statement from the person(s) who gave gifts to the defendant during the month, listing the amounts, dates and reasons given, and a copy of the check received, if any.

Loans From Your Business

Copy of the past six monthly financial statements of all businesses owned or controlled by the defendant that loaned money to the defendant, including a detailed schedule of the "Loans To Shareholder/Owner" or "Due From Shareholder/Owner" general ledger accounts.

Mortgage Loans

Copy of all mortgage checks received during the prior month, 1099 forms submitted with the prior year tax return, and copy of the sales agreement and escrow statement for all mortgage loans owed to the defendant.

Other Loans

Copy of loan documentation and copy of all loan checks received during the prior month.

Other (specify)

Documentation verifying the source of all other monthly cash inflows (not yet disclosed or reported in these financial statements) and copy of all related monthly checks received.

REQUEST FOR MONTHLY CASH FLOW STATEMENT FINANCIAL RECORDS (cont.)

NECESSARY MONTHLY CASH OUTFLOWS

Rent or Mortgage (including taxes)

 Copy of apartment rental lease agreement or home mortgage, most recent mortgage statement, and copy of canceled check.

Groceries (# of people)

 Grocery receipts with corresponding canceled checks (if applicable) for the past month.

Utilities

 Copy of most current utility bills (e.g., electric, heating oil/gas, water/sewer, telephone, and basic cable).

Transportation

 Current month gasoline/motor oil receipts and corresponding canceled checks (if applicable), and gasoline credit card statements for the prior month.

Insurance

 Copy of most current insurance bills for all types of insurance (auto, health, life, homeowners).

Clothing

Purchase receipts with corresponding canceled checks.

Loan Payments

Copy of loan statements (including motor vehicle payment book and lines of credit) for all loans. Also, provide a copy of any financial statements submitted to obtain credit in the past three years.

Credit Card Payments

 Copy of most current billing statement for all charge accounts (e.g., credit cards, revolving charge cards, and department store cards) and lines of credit (e.g., bank line of credit).

Medical

 Documentation of medical expenses (e.g., billing statements, payment receipts, and canceled checks).

Alimony/Child Support

 Copy of divorce decree, canceled checks, and statements documenting child support/alimony obligations with payment history.

Co-payments (electronic monitoring, drug/mental health treatment)

• Canceled check along with statement from the service provider (if any).

Other (specify)

 $\blacklozenge \ \ Specific \ receipts, billing \ statements, and \ corresponding \ canceled \ checks.$

ADDITIONAL INSTRUCTIONS:				
A personal interview has been scheduled for	you with:			
		on		
U.S. Probation C	Officer		Date	
at	Office Location			
Time				
	_			
	T-11			
	Telephone			

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REQUEST FOR NET WORTH STATEMENT FINANCIAL RECORDS

DEFENDANT'S FULL NAME

DOCKET NUMBER

All entries on the Net Worth Statement must be accompanied by supporting documentation. Provide the probation officer with all records listed below that are applicable to your financial statements, along with your completed Net Worth Statement by the close of business

.

ASSETS

Section A - Bank Accounts

Most recent bank account statements (e.g., checking, savings, credit union, money market, brokerage, Certificate of Deposit, or savings bonds) for a three-month period, along with canceled checks.

Section B - Securities

 Most recent securities account statements (e.g., brokerage, annuities, life insurance, IRA, KEOGH, 401K, or thrift savings account) for a three-month period.

Section C - Notes & Accounts Receivable

♦ Copy of signed note receivable.

Section D - Life Insurance

 Copy of all life insurance policies (e.g., whole life, variable life, term).

Section E - Safe Deposit Boxes or Storage Facilities

 Copy of most recent rental invoice for all safe deposit boxes or storage facility rentals within the past year, including receipts or verification of content value.

Section F - Motor Vehicles

♦ Copy of vehicle registration and title for all vehicles owned or leased.

Section G - Real Estate

 Copy of purchase agreement, deeds, and escrow statement for all real property.

Section H - Mortgage Loans Owed To You

 Copy of the sales agreement and escrow statement for all real property.

Section I - Other Assets

 Copy of purchase invoice and appraisal (if already previously obtained), and documentation to verify the fair market value of the asset.

Section J - Anticipated Assets

Copy of documentation to verify future receipt of anticipated asset, (e.g., claim or lawsuit filings, profit sharing plan and current statement, pension plan and current statement, inheritance documents, copy of all trusts, trust income tax returns), and most recent accounting reflecting the value of your interest and income from the trust.

Section K - Business Holdings

In addition to providing the information requested in Section K and completing Section N, provide copies of all income tax returns for each business you had an ownership interest in (e.g., shareholder, partner, proprietor) or an affiliation with (e.g., officer, director, board member, agent, associate) within the last five years. Also provide all financial statements for each business, prepared by you or your accountant, within the past five years.

Business Accounts Receivable

 Copy of current month's billing statements that verify business accounts receivable.

Business Accounts Payable

 Copy of current month's vendor invoices that verify business accounts payable.

Section L - Income Tax Returns

♦ Copy of the five most recent years' income tax returns filed for: Individual (Form 1040), Partnership (Form 1065), Corporation (Form 1120), S Corporation (Form 1120S), and Limited Liability Company (Form 1065). Be sure to include all related schedules and forms. Provide a written explanation for any returns not filed.

Section M - Transfer of Assets

Copy of the bill of sale, documentation of funds received from sale (e.g., a personal or business check, cashiers check or money order), copy of vehicle registration and title of sold vehicle, and escrow closing statements for any real estate sold since the date of your arrest

Section N - Names of Shareholders or Partners

Copy of Articles of Incorporation for all corporations you own or have an interest in. Copy of partnership agreement for all partnerships you have an ownership interest in.

REQUEST FOR NET WORTH STATEMENT FINANCIAL RECORDS (cont.)

LIABILITIES	OTHER RECORDS REQUESTED
Section A - Charge Accounts	
♦ Copy of most current billing statement for all charge accounts (e.g., credit cards, revolving charge cards, and department store cards) and lines of credit (e.g., bank line of credit).	
Section B - Other Debts	
♦ Copy of all notes payable, mortgage loans, current statement of delinquent taxes due, and statements documenting child support/alimony obligations and payment history.	
Section C - Party to Civil Suit	
♦ Copy of all civil suit filings and judgments.	
Section D - Bankruptcy Filings	
♦ Copy of all bankruptcy filings including petition, financial statements submitted, final judgment and order of discharge.	
A personal interview has been scheduled for you with:	
	0.00
U.S. Probation Officer	Date
at Office Location Time	
Telephone	

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REQUEST FOR NET WORTH STATEMENT FINANCIAL RECORDS

DEFENDANT'S FULL NAME

DOCKET NUMBER

All entries on the Net Worth Statement must be accompanied by supporting documentation. Provide the probation officer with all records listed below that are applicable to your financial statements, along with your completed Net Worth Statement by the close of business

.

ASSETS

Section A - Bank Accounts

Most recent bank account statements (e.g., checking, savings, credit union, money market, brokerage, Certificate of Deposit, or savings bonds) for a three-month period, along with canceled checks.

Section B - Securities

 Most recent securities account statements (e.g., brokerage, annuities, life insurance, IRA, KEOGH, 401K, or thrift savings account) for a three-month period.

Section C - Notes & Accounts Receivable

♦ Copy of signed note receivable.

Section D - Life Insurance

 Copy of all life insurance policies (e.g., whole life, variable life, term).

Section E - Safe Deposit Boxes or Storage Facilities

 Copy of most recent rental invoice for all safe deposit boxes or storage facility rentals within the past year, including receipts or verification of content value.

Section F - Motor Vehicles

♦ Copy of vehicle registration and title for all vehicles owned or leased.

Section G - Real Estate

 Copy of purchase agreement, deeds, and escrow statement for all real property.

Section H - Mortgage Loans Owed To You

 Copy of the sales agreement and escrow statement for all real property.

Section I - Other Assets

 Copy of purchase invoice and appraisal (if already previously obtained), and documentation to verify the fair market value of the asset.

Section J - Anticipated Assets

Copy of documentation to verify future receipt of anticipated asset, (e.g., claim or lawsuit filings, profit sharing plan and current statement, pension plan and current statement, inheritance documents, copy of all trusts, trust income tax returns), and most recent accounting reflecting the value of your interest and income from the trust.

Section K - Business Holdings

In addition to providing the information requested in Section K and completing Section N, provide copies of all income tax returns for each business you had an ownership interest in (e.g., shareholder, partner, proprietor) or an affiliation with (e.g., officer, director, board member, agent, associate) within the last five years. Also provide all financial statements for each business, prepared by you or your accountant, within the past five years.

Business Accounts Receivable

 Copy of current month's billing statements that verify business accounts receivable.

Business Accounts Payable

 Copy of current month's vendor invoices that verify business accounts payable.

Section L - Income Tax Returns

♦ Copy of the five most recent years' income tax returns filed for: Individual (Form 1040), Partnership (Form 1065), Corporation (Form 1120), S Corporation (Form 1120S), and Limited Liability Company (Form 1065). Be sure to include all related schedules and forms. Provide a written explanation for any returns not filed.

Section M - Transfer of Assets

Copy of the bill of sale, documentation of funds received from sale (e.g., a personal or business check, cashiers check or money order), copy of vehicle registration and title of sold vehicle, and escrow closing statements for any real estate sold since the date of your arrest

Section N - Names of Shareholders or Partners

Copy of Articles of Incorporation for all corporations you own or have an interest in. Copy of partnership agreement for all partnerships you have an ownership interest in.

REQUEST FOR NET WORTH STATEMENT FINANCIAL RECORDS (cont.)

LIABILITIES	OTHER RECORDS REQUESTED
Section A - Charge Accounts	
♦ Copy of most current billing statement for all charge accounts (e.g., credit cards, revolving charge cards, and department store cards) and lines of credit (e.g., bank line of credit).	
Section B - Other Debts	
♦ Copy of all notes payable, mortgage loans, current statement of delinquent taxes due, and statements documenting child support/alimony obligations and payment history.	
Section C - Party to Civil Suit	
♦ Copy of all civil suit filings and judgments.	
Section D - Bankruptcy Filings	
♦ Copy of all bankruptcy filings including petition, financial statements submitted, final judgment and order of discharge.	
A personal interview has been scheduled for you with:	
	0.00
U.S. Probation Officer	Date
at Office Location Time	
Telephone	

REQUEST FOR SELF-EMPLOYMENT RECORDS

DEFENDANT'S FULL NAME	DOCKET NUMBER
In order to verify your self-employment, you are required to furni business to the probation office by the close of business	ish all of the records below that are applicable to you and your

- ♦ Business Bank Statements for all businesses for the past six months (along with canceled checks).
- ◆ All Business Income Tax Returns for the past five years (including Corporation Form 1120, S Corporation Form 1120S, Partnership Form 1065, Limited Liability Company Form 1065, or Sole Proprietor Form 1040 Schedule C), along with all accompanying forms and schedules.
- ♦ All Annual Financial Statements for the past five years.
- **♦** Most Recent Monthly and Quarterly Financial Statement.
- ♦ Quarterly Estimated Tax Payments (Form 1040-ES or Form 8109 for corporations) for the current year.
- ♦ Occupational Business License for the current year.
- ♦ Articles of Incorporation for all corporations you own or have an interest in.
- ◆ Partnership Agreement for all partnerships you have an ownership interest in.
- ♦ Sales Tax Returns (monthly, quarterly) for the past 12 months.
- ♦ **Property Tax Returns** (inventory, personal property) for the past year.

- ◆ Payroll Tax Returns (quarterly, annually) for the current year, if you presently have or have had employees during the current year.
- ♦ **List of Business Customers** (to whom your business sells goods or provides services).
- ♦ **List of Business Vendors** (who supply the needed raw materials to produce products or provide services).
- ♦ Billing Statements (to collect money from your customers) and Vendor Invoices (to pay bills to your suppliers) for the past six months.
- ♦ Real Estate Escrow Statements and Real Estate
 Leases for all businesses you own or have an interest
 in.
- ♦ Equipment Purchase Agreements or Leases for all businesses you own or have an interest in.
- ♦ Business Insurance Policies for all businesses you own or have an interest in.
- ♦ Business Telephone Bills for the past six months for all business telephones.
- ♦ Samples of Business Advertisements (e.g., in print, radio, television, Internet web page, telephone directory listing and ad, etc.).
- **♦ Business Cards, Stationery** (e.g., business letterhead).

CONFIDENTIAL INFORMATION RELEASE AUTHORIZATION					
INFORMATION RELEASED BY:	INFORMATION RELEASED TO:				
Name	Name				
Organization	Organization				
Address	Address				
City, State, Zip Code	City, State, Zip Code				
SUBJECT	T OF RECORD				
Name	Date of Birth				
Address	Identifying Number				
City, State, Zip Code					
Specific Records Authorized for Release (Include dates of records, if app	olicable.)				
Purpose or Need for Release of Information (Be specific.)					
	at any time, except where information has already been released rization will remain in effect until the expiration time I have				
Authorization expires as of					
Authorization expires month(s) fi	rom signature date.				
Authorization expires month(s) fi	rom signature date.				
As evidenced by my signature below, I hereby authorize disclosure of rec	cords to the person(s) or agency(s) as specified above.				
Signature of Subject of Record	Date				
Signature of Other Legally Authorized Person (if applicable)	Date				
Relationship to Subject of Record					