

Please make sure that the date and information on this statement is current within 30 days or it will be returned to you and the application process will be delayed. Also remember that each statement must be accompanied by the individual's personal tax returns AS FILED with the IRS for the past three years.

As of _____, _____

PERSONAL FINANCIAL STATEMENT

For firms applying for airport concessionaire DBE Certification: A PNW statement is not required at this time.

Each individual owner of a DBE firm whose ownership and control is relied upon for DBE certification is required to provide a Personal Net Worth (PNW) Statement and include it in the notarized DBE certification application package. For a firm with more than one owner relied upon for DBE certification, please make additional copies of this statement. The Unified Certification Program of Mississippi reserves the right to request additional information as necessary and may conduct an on-site visit to verify the information contained in this statement.

I understand that all personal financial information that I submit will remain confidential unless I give my written consent to release this information to a third party. I also understand that the only exception to this confidentiality provision is if I decide to appeal a decision by the UCP of Mississippi.

Name	Business Phone
Residential Address	Residential Phone
City, State, & Zip Code	

Business Name of Applicant/Borrower

ASSETS <i>(Omit Cents)</i>	LIABILITIES <i>(Omit Cents)</i>
Cash on Hand & in Banks..... \$ _____	Accounts Payable..... \$ _____
Savings Accounts..... \$ _____	Notes Payable to Banks and Others \$ _____ (Describe in Section 2)
IRA or Other Retirement Account..... \$ _____	Installment Account (Auto) \$ _____ Mon. Payments \$ _____
Accounts & Notes Receivable \$ _____	Installment Account (Other) \$ _____ Mon. Payments \$ _____
Life Insurance-Cash Surrender Value Only.. \$ _____ (Complete Section 8)	Loan on Life Insurance \$ _____
Stocks and Bonds..... \$ _____ (Describe in Section 3)	Mortgages on Real Estate \$ _____ (Describe in Section 4)
Real Estate \$ _____ (Describe in Section 4)	Unpaid Taxes \$ _____ (Describe in Section 6)
Automobile-Present Value..... \$ _____	Other Liabilities \$ _____ (Describe in Section 7)
Other Personal Property..... \$ _____ (Describe in Section 5)	Total Liabilities..... \$ _____
Other Assets..... \$ _____ (Describe in Section 5)	Net Worth \$ _____
Total..... \$ _____	Total..... \$ _____

Section 1: Source of Income	Contingent Liabilities
Salary \$ _____	As Endorser or Co-Maker \$ _____
Net Investment Income..... \$ _____	Legal Claims & Judgments \$ _____
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 it 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 a part of this statement and signed.)

Name and Address of Note Holder(s).	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	Type of Collateral

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

Number 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. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month/Year			
Status of Mortgage			

Section 5: Other Personal Property and Other Assets. (Describe and, if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and, if delinquent, describe delinquency.)

Section 6: Unpaid Taxes. (Describe in detail as to type, to whom payable, due date, amount and what property, if any.)

Section 7: Other Liabilities. (Describe in detail.)

Section 8: Life Insurance Held. (Give face amount and cash surrender value of policies – name of insurance company and beneficiaries.)

Signature:	Date:	Social Security Number:
Signature:	Date:	Social Security Number: