

Name: _____

Statement of Financial Condition Worksheet

As of _____

ASSETS	Information	Taxpayer	Spouse	Joint	Total
Checking Account					
Savings/Money Market					
Certificates of Deposits					
Account Receivable					
Notes Receivable					
Taxes Receivable					
Stocks					
Mutual Funds					
Municipal Funds					
Residence					
Personal Furnishings					
Clothing					
Furs					
Collections (art, etc.)					
Vehicles:					
Boats					
Motor Homes					
Business Interest:					
Real Estate:					
Cash Value of Life Insurance					
IRA					
Pension Plan					
Profit Sharing					
Other Retirement A/C's					
Other					

TOTAL ASSETS

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LIABILITIES	Information	Taxpayer	Spouse	Joint	Total
Mortgage Payable:					
1 st					
2 nd					
3 rd					
Accounts Payable:					
Notes Payable:					
Credit Cards Payable:					
Taxes Payable					
Vehicle Loans					
Insurance Loans					
Business Liabilities					
Other					
TOTAL LIABILITIES					
<i>Assets - Liabilities = Net Worth</i>					
NET WORTH					

