



Cook County  
**Personal Net Worth Statement**

Revised 08/23/12

**Cook County MBE/WBE Certification Program**

**As of (Insert Date):** \_\_\_\_\_

For applicants applying to the County of Cook Certification or Re-Certification as MBE, and/or WBE, the qualifying owner(s) of the Applicant firm must complete this form.

|                         |  |                 |  |
|-------------------------|--|-----------------|--|
| Business Name           |  |                 |  |
| Owner Name              |  | Business Phone  |  |
| Residence Address       |  | Residence Phone |  |
| City, State, & Zip Code |  | Email           |  |

| ASSETS   |           | LIABILITIES   |           |
|--|-----------|---|-----------|
| Cash on hand and in Banks                                    | \$        | Accounts Payable  | \$        |
| Savings Account  | \$        | Notes Payable to Banks and Others (Describe in Section 2) | \$        |
| IRA or Other Retirement Account                              | \$        | Installment Account (Auto)                                | \$        |
| Accounts and Notes Receivable                                | \$        | Monthly Payments  | \$        |
| Life Insurance— Cash Surrender Value (Describe in Section 8) | \$        | Installment Account (Other)                               | \$        |
| Stock and Bonds (Describe in Section 3)                      | \$        | Monthly Payments  | \$        |
| Real Estate (Describe in Section 4)                          | \$        | Loan on Life Insurance                                    | \$        |
| Automobile – Present Value                                   | \$        | Mortgages on Real Estate                                  | \$        |
| Other Personal Property (Describe in Section 5)              | \$        | Unpaid Taxes (Describe in Section 6)                      | \$        |
| Other Assets (Describe in Section 5)                         | \$        | Other Liabilities (Describe in Section 7)                 | \$        |
|  |           | <b>TOTAL LIABILITES</b>                                   | <b>\$</b> |
| <b>TOTAL ASSETS</b>  | <b>\$</b> | <b>NET WORTH (Assets - Liabilities = NET WORTH)</b>       | <b>\$</b> |

| Section 1. Source of Income    | Contingent Liabilities |                                   |    |
|--------------------------------|------------------------|-----------------------------------|----|
| Salary                         | \$                     | As Endorser of Co-Maker           | \$ |
| Net Investment Income          | \$                     | Legal Claims and 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 towards 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 & Address of Noteholder(s) | Original Balance | Current Balance | Payment Amount | Frequency (monthly, etc.) | How Secured or Endorsed 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 Quotations/Exchange | Date of Quotations/Exchange | Total Value |
|------------------|--------------------|------|----------------------------------|-----------------------------|-------------|
|                  |                    |      |                                  |                             |             |
|                  |                    |      |                                  |                             |             |
|                  |                    |      |                                  |                             |             |
|                  |                    |      |                                  |                             |             |
|                  |                    |      |                                  |                             |             |
|                  |                    |      |                                  |                             |             |

**Section 4. Real Estate Owned** (List each parcel separately. Use attachment if necessary. Each attachment must be identified as 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 pledges 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, when due, amount, and to what property, if any, a tax lien attaches.)

**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)

I authorize the County of Cook to make inquiries as necessary to verify the accuracy of the statements made. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of obtaining certification as a Minority, Woman and/or Veteran Owned Business Enterprise. I UNDERSTAND ANY MATERIAL MISREPRESENTATION OF INFORMATION IN THIS DOCUMENT MAY RESULT IN: 1.) DENIAL OF CERTIFICATION; 2.) DE-CERTIFICATION; 3.) TERMINATION OF ANY CONTRACT AWARDED; 4.) DENIAL OF MBE/WBE/VBE PARTICIPATION CREDIT; AND/OR INITIATION ACTION UNDER FEDERAL, STATE OR LOCAL LAW.

|            |       |      |
|------------|-------|------|
| Signature: | Date: | SSN: |
| Signature: | Date: | SSN: |