



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: