FORM **CFS**
EFO00122
08-23-10

IDAHO STATE TAX COMMISSION

COMPREHENSIVE FINANCIAL STATEMENT

SECTION 1. PERSONAL INFORMATION

Your first name	MI	Last name	Your Social Security number	Your date of birth
Other names and aliases used				
Spouse's first name	MI	Last name	Spouse's Social Security number	Spouse's date of birth
Spouse's other names and aliases used				
Number of dependents living with you			Dependent ages	
Your current physical address	City	State	Zip Code	Home telephone number
Your mailing address (if different from above)	City	State	Zip Code	
Previous address (if at current address less than 2 years)	City	State	Zip Code	
Your cell phone number		Spouse's cell phone number		
E-mail address				
Name and address of nearest relative not living with you				
Relationship		Telephone number of relative		

SECTION 2. EMPLOYMENT INFORMATION

Your employer or business name				Business telephone number
Address	City	State	Zip Code	

☐ Wage earner ☐ Sole proprietor ☐ Partner

How long employed: ________Year(s) _________Month(s) Occupation:______________________

Paid: ☐ Weekly ☐ Every two weeks ☐ Monthly ☐ Semi-monthly Number of allowances claimed on Form W-4:__________

Spouse's employer or business name				Business telephone number
Address	City	State	Zip Code	

☐ Wage earner ☐ Sole proprietor ☐ Partner

How long employed: ________Year(s) _________Month(s) Occupation:______________________

Paid: ☐ Weekly ☐ Every two weeks ☐ Monthly ☐ Semi-monthly Number of allowances claimed on Form W-4:__________

How will you get the funds for your offer? (Example: savings, loan, credit card, borrow from family, etc.)

SECTION 3. GENERAL FINANCIAL INFORMATION (Personal and Business)

Bank Accounts. Include IRA and retirement plans, certificates of deposit, etc. For all accounts, attach copies of your last three statements. Attach additional pages as needed.

Name of institution	Address	Type	Date opened	Account number	Balance
TOTAL. Enter this amount on line 2, Section 4 (Asset and Liability Analysis)					$

Vehicles. Attach additional pages as needed.

Year, make, model, license number	Lender/Lien holder	Current market value	Current payoff	Available equity
TOTAL. Enter this amount on line 3, Section 4 (Asset and Liability Analysis)				$

Personal Property. Include watercraft, RV's, ATV's, aircraft, business equipment, and/or machinery. Attach additional pages as needed.

Year, make, model, license number	Lender/Lien holder	Current market value	Current payoff	Available equity
TOTAL. Enter this amount on line 4, Section 4 (Asset and Liability Analysis)				$

Life Insurance. Attach additional pages as needed.

Name of insurance company	Agent's name and telephone number	Policy number	Whole life or term	Loan/Cash value
TOTAL. Enter this amount on line 5, Section 4 (Asset and Liability Analysis)				$

Securities. Include stocks, bonds, mutual funds, money market funds, securities, etc. Attach additional pages as needed.

Type	Where located	Owner of record	Quantity or denomination	Current value
TOTAL. Enter this amount on line 6, Section 4 (Asset and Liability Analysis)				$

Safe Deposit Boxes. Include locations, box numbers, and contents. Attach additional pages as needed.

Name of institution	Address	Box identification	Current value of assets
TOTAL. Enter this amount on line 7, Section 4 (Asset and Liability Analysis)			$

SECTION 3. GENERAL FINANCIAL INFORMATION (Personal and Business)–continued

Real Property. Attach additional pages as needed.

A. Physical address and description (single family dwelling, multi-family dwelling, lot, etc.)	Mortgage lender's name and address

Purchase date:__________ Purchase price:__________ Mortgage payoff amount:__________ Current value:__________

B. Physical address and description (single family dwelling, multi-family dwelling, lot, etc.)	Mortgage lender's name and address

Purchase date:__________ Purchase price:__________ Mortgage payoff amount:__________ Current value:__________

C. Physical address and description (single family dwelling, multi-family dwelling, lot, etc.)	Mortgage lender's name and address

Purchase date:__________ Purchase price:__________ Mortgage payoff amount:__________ Current value:__________

TOTAL. (Current values A, B, and C minus mortgage payoff) Enter this amount on line 19, Section 4 (Asset and Liability Analysis).... $

Credit Cards. Attach additional pages as needed.

Type of account	Name and address of creditor	Monthly payment	Credit limit	Credit available	Amount owed
			Total	$	
TOTAL. Enter this amount on line 21, Section 4 (Asset and Liability Analysis)					$

Transfers, Repossessions, etc. List any vehicles, equipment, or property sold, given away, or repossessed during the past year. Attach additional pages as needed.

Year, make, model of vehicle, or property address	Who took possession and relationship	Date of transfer

SECTION 4. ASSETS AND LIABILITY ANALYSIS

Current Assets.	
1. Cash	
2. Bank accounts / Balance (from Section 3)	
3. Vehicles / Available equity (from Section 3)	
4. Personal property (from Section 3)	
5. Loan / Cash value of life insurance (from Section 3)	
6. Securities (from Section 3)	
7. Safe deposit box value of contents (from Section 3)	
8. Notes	
9. Accounts receivable	
10. Judgments / Settlements received or pending	
11. Interest in trusts	
12. Interest in estates	
13. Partnership interests	
14. Other assets: major machinery / equipment	
15. Other assets: business inventory	
16. Other assets: collectibles / guns / jewelry / coins / gold / silver, etc.	
17. Other assets: specify	
18. Other assets: specify	
19. Current real estate equity (from Section 3)	
20. TOTAL ASSETS	$

Current Liabilities. Include judgments, notes, and other charge accounts. Don't include vehicle or home loans.	
21. Lines of credit (amount owed) (from Section 3)	
22. Taxes owed to IRS	
23. Liabilities owed to other Idaho agencies	
24. Other liabilities: specify	
25. Other liabilities: specify	
26. Other liabilities: specify	
27. TOTAL LIABILITIES	$

SECTION 5. MONTHLY INCOME AND EXPENSE ANALYSIS

Income. Attach copies of all income sources that contribute to household expenses.

	Gross	Net
28. Wages / Salaries / Tips (yours)		
29. Pension (yours)		
30. Overtime / Bonuses / Commissions (yours)		
31. Wages / Salaries / Tips (spouse's)		
32. Pension (spouse's)		
33. Overtime / Bonuses / Commissions (spouse's)		
34. Business income (yours)		
35. Business income (spouse's)		
36. Rental income		
37. Interest / Dividends / Royalties (average monthly)		
38. Payments from trust / Partnerships / Entities		
39. Child support		
40. Alimony		
41. Unemployment		
42. Disability		
43. Seller carried contracts / Sales		
44. Other income: specify		
45. Other income: specify		
46. TOTAL INCOME:………………………………………………………………………………………		$

Personal Expenses (actually paid).

	Monthly Amount
47. ☐ Rent ☐ Own	
If renting – name, address, and telephone number of landlord	
48. Real estate taxes (Is this included in your mortgage payment?) ☐ Yes ☐ No	
49. Homeowners / Renters insurance: ( ) Association fees: ( )	
50. Utilities: Electric ($) Heating gas / Oil ($) Cable ($)	
Cell phone ($) Phone ($) Water / Garbage / Sewer ($)	
51. Groceries/Food	
52. Gifts & entertainment	
53. Clothing	
54. Auto payments / Lease	
55. Auto insurance	

56. Auto maintenance / Fuel Average daily miles ( )	
57. Life / Health insurance (not deducted from your paycheck)	
58. Medical payments (not covered by insurance)	
59. Estimated tax payments (not deducted from your paycheck)	
60. Court ordered payments (alimony, child support, restitution, not deducted from your paycheck)	
61. Garnishments (not deducted from your paycheck)	
62. Delinquent tax payments (not including Idaho State Tax Commission)	
63. Work-related child care expenses	
64. Bank cards / Department stores	
65. Membership dues: specify	
66. Other expenses: specify	
67. TOTAL PERSONAL EXPENSES..	$

Business Expenses (actually paid).	
68. Materials purchased	
69. Supplies	
70. Installment payments	
71. Monthly payments	
Landlord name, address, and telephone 72. Rent	
73. Insurance	
74. Utilities: Electric ($) Heating gas / Oil ($) Cable ($)	
Cell phone ($) Phone ($) Water / Garbage / Sewer ($)	
75. Net wages and salaries (payroll)	
76. Current taxes (payroll / business)	
77. Other expenses: specify	
78. TOTAL BUSINESS EXPENSES..	$

79. **Net Disposable Income** (line 46 minus line 67)...	$

SECTION 6. AUTHORIZATION TO DISCLOSE

Under penalties of perjury, I declare that this statement of assets, liabilities, and other information is true, correct, and complete. I (we) authorize the Idaho State Tax Commission to obtain a credit report and to verify any information on this financial statement.

Your signature	Date	Spouse's signature	Date