



Bay Adelaide Centre
 333 Bay Street, Suite 1610, Box 22
 Toronto, Ontario, M5H 2R2
 Phone: (416) 214-2555
 Fax: (416) 214-9597

PERSONAL WORTH STATEMENT
 (Please complete both pages)

Legal Name of individual: _____
 (Please put alias name in brackets)

Business Address: _____

Physical Residence Address: _____

Home Phone # _____ Driver's License # or S.I.N.: _____

STATEMENT OF ASSETS AND LIABILITIES AS OF _____ (DD/MM/YYYY)

CURRENT ASSETS

Cash _____

Specify all Banks & _____

Branch Addresses _____

Non-Registered Stocks, Bonds etc. (Schedule "A") _____

Pension _____

RSP or other Registered Funds _____

Accounts & Notes Receivable (Schedule "B") _____

Life Insurance (Cash Surrender Value) _____

Total of Other Current Assets _____

Listing of Other Current Assets _____

TOTAL CURRENT ASSETS _____

CURRENT LIABILITIES

Accounts Payable (Schedule "D") _____

Bank Loan (Schedule "D") _____

Loans Payable (Schedule "D") _____

Taxes Due _____

Total of Other Current Liabilities _____

Listing of Other Current Liabilities _____

TOTAL CURRENT LIABILITIES _____

FIXED ASSETS

Real Estate (Schedule "C") _____

Total of Other Personal _____

Property and Fixed Assets _____

Listing of Other Personal _____

Property and Fixed Assets _____

TOTAL ASSETS _____

DEFERRED LIABILITIES

Mortgages on Real Estate _____

(Schedule "C") _____

Total of other Deferred Liabilities _____

Listing of other Deferred Liabilities _____

TOTAL LIABILITIES _____

PERSONAL NET WORTH _____

(Total Assets – Total Liabilities)

SCHEDULE "A" - NON-REGISTERED STOCKS, BONDS, ETC.				
NAME OF SECURITY	NO. OF SHARES	PAR VALUE	MARKET VALUE	IF PLEDGED, TO WHOM AND FOR WHAT PURPOSE

SCHEDULE "B" - ACCOUNTS & NOTES RECEIVABLE			
FROM WHOM	AMOUNT	DATE DUE	TERMS

SCHEDULE "C" – REAL ESTATE						
LOCATION AND DESCRIPTION OF PROPERTY	IN WHOSE NAME TITLE	DATE OF PURCHASE	PURCHASE PRICE	FAIR MARKET VALUE	AMOUNT OF MORTGAGE	FINANCIAL INSTITUTION
(1) Principal Residence:						

NOTE:
If assets are held jointly, please have the joint owner sign below

SCHEDULE "D" – ACCOUNTS PAYABLE, BANK LOAN & LOANS PAYABLE			
TO WHOM	AMOUNT	DATE DUE	TERMS

The Undersigned hereby declare(s) that all the information provided herein and on the accompanying statements is to the best of my/our knowledge true, complete and correct and understand it will be used by the Surety to determine credit worthiness.

The Undersigned further consent(s) to the Surety making any inquiries it deems necessary to reach a decision on this application, and consent(s) to the disclosure at any time of any credit information about me/us to any credit reporting agency or to any one with whom I/we have financial relations.

Witness _____
(Signature)

(Print Name)

Individual _____
(Signature)

(Print Name)

Address _____
Phone No. _____

Date Signed _____

