



PERSONAL NET WORTH STATEMENT

Date of Statement _____

Complete this form for any person claiming economic disadvantage. If married, an individual claiming economic disadvantage must provide all joint assets and liabilities of both the owner and his/her spouse.

Owner Full Name:		Spouse's Full Name (if applicable):	
Home Street Address:		City, State & Zip Code	
Residence Phone:		Date of Birth:	
Business Name of Applicant:		Business Phone:	

ASSETS		LIABILITIES	
Cash on Hand & in Banks	\$	Notes Payable to Creditors Total Current Balance (Describe in Section 1)	\$
Retirement Accounts (IRA, 401ks, or other)	\$	Installment Accounts (Auto) (Describe in Section 2)	\$
Accounts & Notes Receivables	\$	Mortgages on Real Estate Excluding Primary Residence (Describe in Section 4)	\$
Automobile-Present Value (Describe in Section 2)	\$	Loans on Other Personal Property/Assets (Describe in Section 5)	\$
Stocks & Bonds (Describe in Section 3)	\$	Unpaid Taxes	\$
Real Estate Total Market Value Excluding Primary Residence (Describe in Section 4)	\$	Other Liabilities	\$
Other Personal Property and Assets (Describe in Section 5)	\$	Loans on Life Insurance (Describe in Section 8)	\$
Life Insurance-Cash Surrender Value Only (Complete Section 8)	\$	Total Liabilities	\$
Total Assets	\$	Net Worth (Total Assets – Total Liabilities)	\$

Section 1. Amounts Owed to Creditors.

(Use attachments if necessary. Each attachment must be identified as a part of this statement and signed)

Name and Address of Creditor(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	Secured, and if so Type of Collateral
					Secured/Unsecured
					Secured/Unsecured
					Secured/Unsecured

Section 2. Automobiles & Vehicles

(including recreation vehicles, motorcycles, boats, and other personally owned vehicles) (Use attachments if necessary. Each attachment must be identified as part of this statement and signed)

Year, Make & Model of Vehicle	Current Market Value	Loan Balance Outstanding



Section 3. Stocks and Bonds.

Number of Shares	Name of Issuer of Securities	Cost	Market Value Quotation / Exchange	Date of Quotation / Exchange	Total Value

Section 4. Real Estate Owned. (List each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C
Primary Residence	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Street Address, City, State, Zip			
Date of Purchase			
Original Cost	\$	\$	\$
Present Market Value	\$	\$	\$
Name of Mortgage Holder			
Mortgage Balance	\$	\$	\$

Section 5. Other Personal Property and Other Assets. (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment, and if delinquent, describe delinquency.)

Type of Property	Current Market Value	Loan Balance Outstanding

Section 6. Unpaid Taxes. (Describe in detail, including type, to whom payable, when due, amount, as to what property, and if delinquent, describe delinquency.)

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Section 7. Other Liabilities. (Describe in detail.)

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Section 8. Life Insurance Held. (Give face amount, cash surrender value of policies, name of insurance company, and beneficiaries.)

Insurance Company Name	Face Value Amount	Cash Surrender Amount	Beneficiaries	Loans on Policy

I HEREBY REPRESENT AND WARRANT THAT THE FOREGOING INFORMATION CONTAINED IN THIS FINANCIAL STATEMENT, AND ANY INFORMATION PROVIDED IN CONNECTION WITH IT, IS TRUE AND CORRECT AND PRESENTS FAIRLY IN ALL MATERIAL RESPECTS MY FINANCIAL CONDITION. FURTHER, I PROMISE TO NOTIFY COLUMBUS CITY SCHOOLS IMMEDIATELY IF MY NET WORTH AS SHOWN ON THIS FINANCIAL STATEMENT EXCEEDS \$750,000.

CONSENT TO RELEASE FINANCIAL INFORMATION

I HEREBY AUTHORIZE ALL BANKS, FINANCIAL INSTITUTIONS, BUSINESSES, EMPLOYERS, CREDIT REPORTING AGENCIES, ANY OTHER BUSINESSES TO WHICH I AM INDEBTED OR HAVE ASSETS LOCATED, AND ANY OTHER INDIVIDUALS OR ENTITIES TO PROVIDE INFORMATION CONCERNING MY FINANCES AND ASSETS, WITHOUT LIABILITY, TO:

Columbus City Schools
c/o Office of Outreach Services
889 17th Ave., Suite #119
Columbus, OH 43211
Phone: 614-365-5603
Email: outreachservices@columbus.k12.oh.us

THIS INFORMATION WILL INCLUDE, BUT IS NOT LIMITED TO, FINANCIAL AND ACCOUNTING REPORTS, INCOME TAX RETURNS, BANK STATEMENTS, WAGE STATEMENTS, REAL ESTATE RECORDS, BUSINESS RECORDS, AND OTHER CONFIDENTIAL DOCUMENTS. I UNDERSTAND THAT THE INFORMATION WILL BE TRANSMITTED BY MAIL, FACSIMILE, OR ELECTRONIC FORMAT.

THIS CONSENT TO RELEASE IS TO ENABLE COLUMBUS CITY SCHOOLS TO INVESTIGATE THE INFORMATION IN THIS FINANCIAL STATEMENT AND TO ASSESS ECONOMIC DISADVANTAGE FOR THE COLUMBUS CITY SCHOOLS LEDE VENDOR PROGRAM. THIS CONSENT SHALL CONTINUE TO OPERATE SO LONG AS I OR ANY BUSINESS IN WHICH I HAVE AN OWNERSHIP INTEREST APPLY FOR OR PARTICIPATE IN THE LEDE VENDOR PROGRAM.

Owner Signature: _____ Date: _____

Spouse Signature: _____ Date: _____
(if applicable)