

Certificate of Financial Status

Applicant names: (first and last name of each adopting parent)

1. _____ 2. _____

Income Information

			This year	Last Year
Annual Income	Single Applicant	=	\$ _____	_____
	Husband	=	\$ _____	_____
	Wife	=	\$ _____	_____
Other Annual Income	Single Applicant	=	\$ _____	_____
	Husband	=	\$ _____	_____
	Wife	=	\$ _____	_____
Life Insurance	Single Applicant	=	\$ _____	_____
	Husband	=	\$ _____	_____
	Wife	=	\$ _____	_____

Assets:

Value:

Personal Property (vehicles and others)	\$	_____
Real Estate (residence and others)	\$	_____
Stocks and Bonds	\$	_____
Savings Account(s)	\$	_____
Checking Account(s)	\$	_____
Other Investments	\$	_____

Total Assets: (Not including annual income and insurance) \$ _____

Liabilities:

Monthly Payment:

Total Owed:

Credit Cards	\$ _____	\$ _____
Home Mortgage	\$ _____	\$ _____
Other Liabilities	\$ _____	\$ _____

Total Liabilities: \$ _____

NET WORTH: \$ _____

I/We attest that the above-mentioned financial statement is an accurate summary of my/our assets, liabilities, and others.

Signature: _____ Signature: _____ Date: _____

Signed and sworn to before me in _____ County, _____
(State)

on _____, 2_____.
(Date)

Notary Stamp

Notary Signature _____