SOUTH DAKOTA DEPARTMENT OF LABOR AND REGULATION

## **BOARD OF ABSTRACTERS' BOARD OF EXAMINERS**

810 N. Main St. #298, Spearfish, SD 57783

Tel: 605.642.1600 | Fax: 605.722.1006 | Email: office@sdlicensing.com | dlr.sd.gov/abstracters

## PERSONAL FINANCIAL STATEMENT

Name:		
Box/ Street Address:		
City:		
Date of Birth:	Social Security Number:	
Phone Number (Business):	Phone Number (Home):	
Employer:		
Position/Title:	Dependents (Include Self):	
ASSETS		
Cash	\$	
Securities	\$	
Life Insurance Cash Value	\$	
Mortgages and Contracts held by you	\$	
Homestead	\$	
Other Real Estate	\$	
Profit Sharing (Net of Loans)	\$	
Pension and Retirement Accounts (Include IRA Accounts)	\$	
Automobiles (describe)	\$	
Personal Property	\$	
Other Assets (described)	\$	
Total	\$	

## LIABILITIES

Short Term Notes due to Financial Institutions	\$
Short Term Notes due to Others	\$
Credit Accounts and Bills Due	\$
Insurance Loans	\$
Installment Loans and Contracts	\$
Mortgages on Home	\$
Mortgages on Other Real Estate	\$
Taxes	\$
Other Liabilities (Describe)	\$
Total	\$
TOTAL ASSETS	\$
TOTAL LIABILITIES	\$
NET WORTH	\$

The undersigned herby certifies that the information contained on this form is true and correct in all respects

Signature

Date