

**FAX COMPLETED FORM TO: (203) 389 - 6326  
PRAETORIAN GROUP - STATEMENT OF NET WORTH**

**Name:**  
**Address:**  
**City, State, Zip:**

<b>ASSETS</b>	
Cash On Hand & in Banks	
Savings Accounts	
IRA	
Accounts & Notes Receivable	
(Describe)	
Life Insurance (Cash Surrender Value)	
Real Estate	
(Describe)	
Automobile (Present Value)	
Other Personal Property	
(Describe)	
Other Assets	
(Describe)	
<b>TOTAL ASSETS</b>	

<b>SOURCE OF INCOME</b>	
Salary	
Net Investment Income	
Real Estate Income	
Other Income	
(Describe)	
<b>TOTAL INCOME</b>	

<b>LIABILITIES</b>	
Accounts Payable	
Notes Payable to Others	
(Describe)	
Installment Account (Auto)	
Monthly Payments	
Installment Account (Other)	
Monthly Payments	
Loans on Life Insurance	
Mortgage on Real Estate	
Unpaid Taxes	
(Describe)	
Other Liabilities	
(Describe)	
<b>TOTAL LIABILITIES</b>	

<b>TOTAL ASSETS</b>	
<b>TOTAL LIABILITIES</b>	
<b>NET WORTH</b>	

<b>CONTINGENT LIABILITIES</b>	
As Endorser or Co-maker	
Legal Claims or Judgements	
Provision for Federal Income Tax	
Other Special Debt	
<b>TOTAL CONTINGENT LIABILITY</b>	

By signing below, the undersigned hereby attests the information provided is true and accurate.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date Signed