

PERSONAL INCOME STATEMENT



1. PERSONAL INFORMATION

Full Legal Name:		CRD:	
Email Address:		Phone:	

2. DATE PREPARED

Date:

3. PERSONAL INCOME STATEMENT

MONTHLY REVENUE		VALUE	MONTHLY EXPENSES		VALUE
1. Commissions ^a			11. Mortgage/Rent		
2. Salary ^a			12. Other Real estate Loan(s)		
3. Child/Spousal Support Received			13. Property Taxes		
4. Business Interest			14. Home Owners/Rental Insurance		
5. Real Estate Income			15. Child/spousal Support Paid		
6. Investment Income			16. Utilities ^b		
7. Other (Specify)			17. Other Household Expenses		
8. Other (Specify)			18. Food		
9. Other (Specify)			19. Vehicle Loan(s) ^c		
			20. Vehicle Insurance ^c		
			21. Gas		
			22. Other Vehicle Expenses		
			23. Childcare Expenses		
			24. Clothes		
			25. Liens/Judgements (list separately)		
			26. <input type="text"/>		
			27. <input type="text"/>		
			28. <input type="text"/>		
			29. Compromise with Creditor Payments		
			30. Taxes ^d		
			31. Credit Card Payments		
			32. Student Loans		
			33. Other Loans		
			34. Life Insurance		
			35. Other Insurance		
			36. Entertainment		
			37. Unreimbursed Business Related Expenses		
			38. Medical/Dental Expenses		
			39. Other (Specify)	<input type="text"/>	
			40. Other (Specify)	<input type="text"/>	
			41. Other (Specify)	<input type="text"/>	
10. TOTAL REVENUE			42. TOTAL EXPENSES		-
			43. NET INCOME (REVENUE - EXPENSES)		-

4. FOOTNOTES & ADDITIONAL EXPLANATION

FOOTNOTES

- a. If your income is listed as before tax, please include as an expense the taxes due on the income
- b. Please include expenses related to water, electricity, gas, garbage, recycling, home telephone, cellular phone, internet, etc.
- c. Please include as vehicles cars, trucks, SUVs, all-terrain vehicles (ATVs), motorcycles, scooters, boats, recreational vehicles (RVs), campers, etc.
- d. Please include current income tax due, payments for unpaid taxes due, etc.

ADDITIONAL EXPLANATION

Use this section for additional explanation of items on page one. Each note should reference a corresponding line number from page one. Please note if revenue or an expense is a one-time occurrence. Attach additional sheets if necessary. Any documentation such as IRS repayment agreements that would explain or support a particular entry should also be attached. To protect your privacy, you may redact your social security number contained in any document submitted to the Securities Department

5. CERTIFICATION

I certify that the statements in this document are true and complete. I understand that any omitted statement, misrepresentation, or fraud may be cause for denial of my application, disciplinary action, or may be punishable by law.

Signature

Date:

6. RETURN FORM TO THE SECURITIES DEPARTMENT

Email Address: ASDinfo@arkansas.gov

Phone: (501) 324-9260

Mailing Address: #1 Commerce Way
Suite 402
Little Rock, AR 72202

Fax: (501) 324-9268