

**State of New Jersey Division of Taxation  
Financial Statement of Debtor**

**Section I – Employment Data**

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_  
Name (Debtor) Birth Date Social Security #
4. \_\_\_\_\_  
Home Address Phone Number
5. \_\_\_\_\_ 6. \_\_\_\_\_ 7. \_\_\_\_\_  
Name (Spouse) Birth Date Social Security #  
(Provide address if different from yours)

**DEBTOR EMPLOYMENT DATA**

8. Occupation: \_\_\_\_\_ 9. How Long in Present Employment? \_\_\_\_\_
10. Present Employer's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone Number \_\_\_\_\_
11. Present Monthly Income Total: \$ \_\_\_\_\_ (Provide breakdown on line below)  
Salary or Wages \$ \_\_\_\_\_ Commissions \$ \_\_\_\_\_ Other (State Source) \$ \_\_\_\_\_
12. Other Employment – Within the last three years:
- | Employer's Name | Address | Phone Number | Employment Dates |
|-----------------|---------|--------------|------------------|
| _____           | _____   | _____        | _____            |
| _____           | _____   | _____        | _____            |
| _____           | _____   | _____        | _____            |

**SPOUSE'S EMPLOYMENT DATA**

13. Occupation: \_\_\_\_\_ 14. How Long in Present Employment? \_\_\_\_\_
15. Present Employer's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone Number \_\_\_\_\_
16. Present Monthly Income Total: \$ \_\_\_\_\_ (Provide breakdown on line below)  
Salary or Wages \$ \_\_\_\_\_ Commissions \$ \_\_\_\_\_ Other (State Source) \$ \_\_\_\_\_
17. Other Employment – Within the last three years:
- | Employer's Name | Address | Phone Number | Employment Dates |
|-----------------|---------|--------------|------------------|
| _____           | _____   | _____        | _____            |
| _____           | _____   | _____        | _____            |
| _____           | _____   | _____        | _____            |

**DEPENDENTS**

18. Total Number: \_\_\_\_\_
- Relationship \_\_\_\_\_ Age \_\_\_\_ Relationship \_\_\_\_\_ Age \_\_\_\_ Relationship \_\_\_\_\_ Age \_\_\_\_
19. Total Monthly Income of Dependents (except spouse): \$ \_\_\_\_\_

## Section II – Financial Data

20. For what period did you last file a Federal tax return? \_\_\_\_\_

21. For what period did you last file a New Jersey Income tax return? \_\_\_\_\_

22. Amount of **Gross Income** reported on last Federal tax return filed? \$ \_\_\_\_\_

### Monthly Income and Expense Analysis

Total Income	Gross	Necessary Living Expenses	Claimed
23. Wages/Salaries (Taxpayer)	\$	34. National Standard Expenses <sup>(1)</sup>	\$
24. Wages/Salaries (Spouse)		35. Rent/ Mortgage	
25. Interest / Dividends		36. Utilities	
26. Net Business Income		37. Health Care	
27. Rental Income		38. Taxes (Income) - Federal	
28. Pension (Taxpayer)		39. Taxes (Income) – State	
29. Pension (Spouse)		40. Property Taxes (If not included with mortgage)	
30. Child Support		41. Court Ordered Payments	
31. Alimony		42. Child/Dependent Care	
32. Other Income (Specify)		43. Other Expenses (Specify)	
<b>33. Total Income</b>	<b>\$</b>	<b>44. Total Expenses</b>	<b>\$</b>

(1) Select value from National Standard Expenses Table on last page of this application

Section III – Assets and Liabilities

Assets

45.	Cash	\$ _____
46.	Checking Account	_____
47.	Savings Account	_____
48.	Stocks, Bonds & Other Securities	_____
49.	Cash or Loan Value of Insurance	_____
50.	Motor Vehicles (Model and Year)	
	a. Owned Vehicles	
	1. _____	_____
	2. _____	_____
	3. _____	_____
	b. Leased Vehicles	
	1. _____	_____
	2. _____	_____
	3. _____	_____
51.	Debts Owed to You	_____
52.	Household Furniture and Goods	_____
53.	Items Used in Trade or Business	_____
54.	Real Estate	
	1. _____	_____
	2. _____	_____
	3. _____	_____
	4. _____	_____
55.	Any Other Assets - Specify	
	1. _____	_____
	2. _____	_____
	3. _____	_____
	4. _____	_____
	<b>Total Assets</b>	<b>\$ _____</b>

Section III – Assets and Liabilities Continued

Liabilities

56.	Bills Owed (Doctors, Lawyers, etc.)	
	1. _____	\$ _____
	2. _____	_____
	3. _____	_____
57.	Installment Debt (Car, Credit Card, etc.)	
	1. _____	_____
	2. _____	_____
	3. _____	_____
	4. _____	_____
	5. _____	_____
58.	Federal Taxes Owed	_____
	Has Federal lien been filed? _____	
	(If yes please supply copy)	
59.	State Taxes Owed	_____
60.	Real Estate Mortgages (2)	
	1. _____	_____
	2. _____	_____
	3. _____	_____
61.	Loans Payable (To Banks, Finance Co., etc.) (2)	
	1. _____	_____
	2. _____	_____
	3. _____	_____
62.	Judgments Owed (Other Than Federal or State)	
	(Please supply copy)	
	1. _____	_____
	2. _____	_____
	3. _____	_____
63.	Other Debts (Itemize)	
	1. _____	_____
	2. _____	_____
	3. _____	_____
	<b>Total Liabilities</b>	<b>\$ _____</b>

(2) Note: Please include your current statement from lender with monthly payment amount and current balance due.

## Section IV – General Financial Information

64. Real Property (Brief description and type of ownership)

Physical Address	Date Acquired	Cost
_____	_____	_____
_____	_____	_____
_____	_____	_____

65. Bank Accounts (Include Savings and Loans, Credit Unions, IRAs & Retirement Plans, Certificate of Deposit, etc.)

Name of Institution	Address	Type	Acct #	Balance
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
<b>Total \$</b>				_____

66. Securities (Stocks, bonds, mutual funds, money market funds, government securities, etc.)

Kind	Quantity	Owner of Record	Current Value
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
<b>Total \$</b>			_____

67. Charge Cards and lines of credit from banks, credit unions and savings and loans

Type of Account or Card	Financial Institution	Credit Limit	Amount Owed	Monthly Payment
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
<b>Total \$</b>				_____

68. Life Insurance

Name of Company	Policy Number	Type Whole/Term	Face Amount	Available Loan Value
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
<b>Total \$</b>				_____

Section V – General Information

69. Are you a party in any lawsuit now pending? \_\_\_\_ Yes \_\_\_\_ No  
If yes please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

70. Are you a trustee, executor or administrator? \_\_\_\_ Yes \_\_\_\_ No  
If yes please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

71. Is anyone holding any monies on your behalf? \_\_\_\_ Yes \_\_\_\_ No  
If yes please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

72. Is there any likelihood you would receive an inheritance? \_\_\_\_ Yes \_\_\_\_ No  
If yes please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

73. Do you receive or under any circumstances expect to receive benefits from an established trust from a claim for compensation or damages from a contingent or future interest in property of any kind? \_\_\_\_ Yes \_\_\_\_ No  
If yes please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**With knowledge of the penalties for false statements provided by 2C:21-4(b) (\$7,500 fine and /or 3-5 years imprisonment) and with the knowledge that this financial statement is submitted by me to affect action by the Division of Taxation, I certify that I believe the above statements are true and that it is a complete statement of all my income and assets, real and personal, whether held in my name or by any other.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

# National Standards: Food, Clothing and Other Items

**Disclaimer:** IRS Collection Financial Standards are intended for use in calculating repayment of delinquent taxes. These Standards are effective on April 1, 2013 for purposes of federal tax administration only. Expense information for use in bankruptcy calculations can be found on the website for the [U.S. Trustee Program](#).

Download the [national standards for food, clothing and other items](#) in PDF format for printing. Please note that the standard amounts change, so if you elect to print them, check back periodically to assure you have the latest version.

National Standards have been established for five necessary expenses: food, housekeeping supplies, apparel and services, personal care products and services, and miscellaneous.

The standards are derived from the Bureau of Labor Statistics (BLS) Consumer Expenditure Survey (CES) and defined as follows:

Food includes food at home and food away from home. Food at home refers to the total expenditures for food from grocery stores or other food stores. It excludes the purchase of nonfood items. Food away from home includes all meals and snacks, including tips, at fast-food, take-out, delivery and full-service restaurants, etc.

Housekeeping supplies includes laundry and cleaning supplies, stationery supplies, postage, delivery services, miscellaneous household products, and lawn and garden supplies.

Apparel and services includes clothing, footwear, material, patterns and notions for making clothes, alterations and repairs, clothing rental, clothing storage, dry cleaning and sent-out laundry, watches, jewelry and repairs to watches and jewelry.

Personal care products and services includes products for the hair, oral hygiene products, shaving needs, cosmetics and bath products, electric personal care appliances, and other personal care products.

The miscellaneous allowance is for expenses taxpayers may incur that are not included in any other allowable living expense items, or for any portion of expenses that exceed the Collection Financial Standards and are not allowed under a deviation. Taxpayers can use the miscellaneous allowance to pay for expenses that exceed the standards, or for other expenses such as credit card payments, bank fees and charges, reading material and school supplies.

Taxpayers are allowed the total National Standards amount monthly for their family size, without questioning the amounts they actually spend. If the amount claimed is more than the total allowed by the National Standards for food, housekeeping supplies, apparel and services, and personal care products and services, the taxpayer must provide documentation to substantiate those expenses are necessary living expenses. Deviations from the standard amount are not allowed for miscellaneous expenses. Generally, the total number of persons allowed for National Standards should be the same as those allowed as exemptions on the taxpayer's most recent year income tax return.

Expense	One Person	Two Persons	Three Persons	Four Persons
Food	\$315	\$556	\$645	\$777
Housekeeping supplies	\$30	\$66	\$65	\$74
Apparel & services	\$88	\$162	\$209	\$244
Personal care products & services	\$34	\$60	\$64	\$70
Miscellaneous	\$116	\$209	\$251	\$300

<b>Expense</b>	<b>One Person</b>	<b>Two Persons</b>	<b>Three Persons</b>	<b>Four Persons</b>
<b>Total</b>	<b>\$583</b>	<b>\$1,053</b>	<b>\$1,234</b>	<b>\$1,465</b>

<b>More than four persons</b>	<b>Additional Persons Amount</b>
For each additional person, add to four-person total allowance:	\$281