♠ PROB 48C
(9/00)

REQUEST FOR MONTHLY CASH FLOW STATEMENT FINANCIAL RECORDS

DEFENDANT'S FULL NAME

DOCKET NUMBER

All entries on the Cash Flow Statement must be accompanied by supporting documentation. Provide the probation officer with all records listed below are applicable to your financial statements, along with your completed Cash Flow Statement by the close of

MONTHLY CASH INFLOWS

Salary/Wages

Copy of all W-2 forms submitted with the prior year income tax return.
 Copy of all pay stubs for the most recent one-month period.

Cash Advances

♦ Copy of all pay stubs documenting cash advances.

Cash Bonuses

 Copy of all pay stubs documenting cash bonuses, and copy of related 1099 form.

Commissions

♦ Copy of all 1099 forms submitted with the prior year income tax return.

Business Income

◆ Copy of the past six monthly financial statements of all businesses owned or controlled by the defendant. Also, be sure to provide all financial information requested in the "Assets" portion of the "Net Worth Statement" under "Section K, Business Holdings."

Interest/Dividends

 Copy of most recent earnings statement from a financial institution (e.g., bank, brokerage firm, etc.). Copy of all 1099-INT forms, reporting annual interest earnings, for the past year.

Rental Income

 Copy of lease rental agreement, copy of monthly rental check received, and copy of the deposit on the defendant's monthly bank statement.

Trust Income

 Copy of the monthly trust income check, copy of the trust agreement, and a copy of the trust income tax return for the prior year.

Alimony/Child Support

 Copy of divorce decree, copy of payments received, and statements documenting child support/alimony obligations with payment history.

Social Security

 Copy of most recent Social Security check and most recent benefits determination letter.

Other Government Benefits

 Copy of most recent government subsidy check (e.g., unemployment compensation, or child support/alimony) and most recent benefits determination letter.

Pensions/Annuities

 Copy of pension/annuity check, copy of most recent pension plan activity statement or annuity statement, and copy of pension plan or annuity contract.

Allowances (housing, auto, travel)

 Copy of related pay stub, 1099 form for prior year, and possibly a letter from the employer on company letterhead.

Gratuities/Tips

 Copy of current month's pay stubs, letter from employer estimating monthly gratuities earned, and W-2 form for the prior year.

Spouse (Significant Other's) Salary/Wages

♦ Copy of all W-2 forms submitted with the prior year income tax return. Copy of all pay stubs for the most recent one-month period.

Other Joint Spousal Income

◆ Documentation verifying any monthly income jointly earned with the spouse or significant other, (e.g., income from the spouse or significant other or income from a business owned or controlled by the spouse or significant other, that the defendant has a joint ownership interest in, or controls).

Income of Others in the Home

♦ Verification of the monthly earnings of all others living in the defendant's household (e.g., all pay stubs for the prior month, W-2 forms, and 1099 forms for the prior year), paid receipts or canceled checks for necessary monthly household expenditures (e.g., for food, room rental, telephone, transportation, etc.) actually paid by this person on behalf of the defendant.

Gifts From Family

♦ A signed and dated statement from the family member who gave gifts to the defendant during the month, listing the amounts, dates and reasons given, and a copy of the check received, if any.

Gifts From Others

A signed and dated statement from the person(s) who gave gifts to the defendant during the month, listing the amounts, dates and reasons given, and a copy of the check received, if any.

Loans From Your Business

Copy of the past six monthly financial statements of all businesses owned or controlled by the defendant that loaned money to the defendant, including a detailed schedule of the "Loans To Shareholder/Owner" or "Due From Shareholder/Owner" general ledger accounts.

Mortgage Loans

Copy of all mortgage checks received during the prior month, 1099 forms submitted with the prior year tax return, and copy of the sales agreement and escrow statement for all mortgage loans owed to the defendant.

Other Loans

 Copy of loan documentation and copy of all loan checks received during the prior month.

Other (specify)

 Documentation verifying the source of all other monthly cash inflows (not yet disclosed or reported in these financial statements) and copy of all related monthly checks received.

REQUEST FOR MONTHLY CASH FLOW STATEMENT FINANCIAL RECORDS (cont.)

NECESSARY MONTHLY CASH OUTFLOWS

Rent or Mortgage (including taxes)

 Copy of apartment rental lease agreement or home mortgage, most recent mortgage statement, and copy of canceled check.

Groceries (# of people)

 Grocery receipts with corresponding canceled checks (if applicable) for the past month.

Utilities

 Copy of most current utility bills (e.g., electric, heating oil/gas, water/sewer, telephone, and basic cable).

Transportation

 Current month gasoline/motor oil receipts and corresponding canceled checks (if applicable), and gasoline credit card statements for the prior month.

Insurance

 Copy of most current insurance bills for all types of insurance (auto, health, life, homeowners).

Clothing

Purchase receipts with corresponding canceled checks.

Loan Payments

Copy of loan statements (including motor vehicle payment book and lines of credit) for all loans. Also, provide a copy of any financial statements submitted to obtain credit in the past three years.

Credit Card Payments

 Copy of most current billing statement for all charge accounts (e.g., credit cards, revolving charge cards, and department store cards) and lines of credit (e.g., bank line of credit).

Medical

 Documentation of medical expenses (e.g., billing statements, payment receipts, and canceled checks).

Alimony/Child Support

 Copy of divorce decree, canceled checks, and statements documenting child support/alimony obligations with payment history.

Co-payments (electronic monitoring, drug/mental health treatment)

♦ Canceled check along with statement from the service provider (if any).

Other (specify)

♦ Specific receipts, billing statements, and corresponding canceled checks.

ADDITIONAL INSTRUCTIONS:				
A personal interview has been scheduled for you wi	th:			
		on		
U.S. Probation Officer			Date	
	OCC. I			
atTime	Office Location			
Time				
	Telephone			