



MISSOURI DEPARTMENT OF TRANSPORTATION
 MOTOR CARRIER SERVICES
 PO BOX 893, 1320 CREEK TRAIL DRIVE, JEFFERSON CITY, MO 65102-0893
FINANCIAL STATEMENT OF HOUSEHOLD GOODS AND PASSENGER CARRIERS

For Year Ending December 31, 2008

PHONE: 573-751-3358
 FAX: 573-522-6708

CARRIER NAME, ADDRESS & USDOT NO.	DUE: APRIL 15, 2009 MAIL TO: MODOT - Motor Carrier Services P.O. Box 893 Jefferson City, Mo 65102-0893
-----------------------------------	--

General Information

Daytime Telephone Number:

1. Motor carrier is a: Sole-Proprietorship Partnership Limited Partnership (LP) Corporation
 Limited Liability Company (LLC) Limited Liability Limited Partnership (LLP) Trust

2. Please check your type of operation (Check all that apply):

Transporting Household Goods in areas outside of Commercial Zones
 Transporting Household Goods within Commercial Zones
 Transporting Passengers

Balance Sheet (See Notes 1, 2 and 3 below)

	BALANCE AS OF 12/31/08
1. Total Current Assets (Include cash in checking and savings; amounts due from others; prepaid insurance, taxes or other payments; cost of materials and supplies on hand; and other near cash assets.)	\$
2. Other Assets (Include trucks, trailers (or buses) and other equipment shown in Section 10 of this application minus depreciation; and other property.)	\$
3. Total Assets (Add lines 1 and 2 above)	\$
4. Total Current Liabilities (Include any amount due to others within 1 year or less on any loans, accounts due or other debt.)	\$
5. Total Long Term Liabilities (Include any amount due to others after 1 year on any loans, accounts due or other debt.)	\$
6. Capital Stock (Corporations only)	\$
7. Retained Earnings or Other Capital (Corporations only)	\$
8. Net Worth-Partners or Individuals	\$
9. Total Liabilities and Equity (Add lines 4 through 8 above)	\$

CERTIFICATION

I, the undersigned, under penalty for false statement, certify that the above information is true and correct and that I am authorized to execute and file this document on behalf of the applicant.

SIGNATURE	TITLE	DATE
-----------	-------	------

- NOTE 1. A **sole owner** must show all assets and liabilities of the bus or truck business, other business **and personal assets**.
 NOTE 2. **Partnerships** must show only those assets and liabilities of the partnership (**do not include** personal items of each partner).
 NOTE 3. The Balance Sheet above must be completed on a calendar year basis (January 1 through December 31).