

Lassen Community College
 Financial Aid Office
 (530) 251-8849

P.O. Box 3000
 Susanville, CA 96130
 Fax: (530) 251-8893

Dependent Assets
2009-2010 Dependent Asset Information

Student Name: _____

Day Time

SSN or ID #: _____ Phone Number: _____

The information reported on your 2009-2010 FAFSA requires additional clarification. Please complete the information below. Sign and return the form to the Financial Aid & Scholarship Office. **Please provide asset values as of the date you signed your FAFSA.** If any of the asset amounts are zero, enter "0".

| Please Print with Black Ink | Student | Parent |
|---|----------|----------|
| Cash, Savings, and Checking Accounts balance(s)- <i>(do not include retirement accounts)</i> (Include CD's, Money Market Accts., Stocks, Bonds, etc.) Type(s) of Account: _____ | \$ _____ | \$ _____ |
| 529 College Savings Plan, Coverdell Savings Account, Prepaid Tuition Plans, etc. Enter the value of this account as of the date you completed your FAFSA | \$ _____ | \$ _____ |
| Net value of rental real estate, royalties, partnerships, S Corporations, trusts, other real estate and/or investments. <i>(Do not include the home in which you live)</i> (Current market value minus debt owed = Net value) Types of Assets: _____ | \$ _____ | \$ _____ |
| Business Net Value (Current Market Value minus Debt Owed = Net Value) Name of Business: _____ Type of Business: _____ Does your family own at least 50% of the business? Yes _____ No _____ How many employees do you employ? _____ 100 or less _____ More than 100 | \$ _____ | \$ _____ |
| Investment Farm Net Value <i>(do not include value if you live on the farm)</i> (Current Market Value minus Debt Owed = Net Value) | \$ _____ | \$ _____ |
| Please Sign And Date Below | | |

Student Signature: _____

Date: _____

Parent Signature: _____

Date: _____