



Name _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Business Phone _____ Fax _____

Cell Phone _____ E-mail address _____

Work Experience _____

FINANCIAL STATEMENT

ASSETS	DOLLARS	LIABILITIES	DOLLARS
Cash		Mortgage on Home	
Stocks/Bonds		2 nd Mortgage on Home	
Home		Other Real Estate Loans	
Other Real Estate		Automobiles	
Cash Value Life Insurance		Notes Payable	
Automobiles		Taxes Due	
Retirement Funds		Credit Card Balances	
Other Assets:		Other Liabilities:	
TOTAL ASSETS		TOTAL LIABILITIES	

NET WORTH (Total assets-Total Liabilities) \$ _____

Which Listing Are You Inquiring About: _____

Type of Business Preference: 1) _____
2) _____
3) _____

Location Preference: 1) _____
2) _____
3) _____

Minimum Annual Income Required: \$ _____

Cash Available for Down Payment: \$ _____

When Will Cash Be Available: _____

When do you want to take possession: _____

Who Will Be Involved In The Decision: _____

Do You Require Immediate Income: Yes _____ No _____

Signature _____

Signature _____

Date _____

Date _____