

BUSINESS BROKERS of FLORIDA
FINANCIAL STATEMENT – STRICTLY CONFIDENTIAL

BBF

(Tab Between Fields)

Name: _____ **Date:** _____
Address: _____
City: _____ **ST:** _____ **Zip:** _____ **Phone:** _____

ASSETS

Cash on Hand in Banks: \$ _____
U.S. Government Securities: \$ _____
Accounts, Loans and Notes Receivable: \$ _____
Cash Surrender Value of Life Insurance: \$ _____
Value of Businesses Owned: \$ _____
Other Stocks and Bonds: \$ _____
Real Estate: \$ _____
Automobiles – (Number): \$ _____
Household Furnishings and Personal Effects: \$ _____
Other Assets Itemized Below: _____
\$ _____
TOTAL ASSETS: \$ _____

LIABILITIES

Notes Payable: \$ _____
Liens on Real Estate: \$ _____
Other Liabilities Itemized Below: _____
\$ _____
TOTAL LIABILITIES: \$ _____

NETWORTH = TOTAL ASSETS MINUS TOTAL LIABILITIES: \$ _____

SOURCE OF INCOME

Salary: \$ _____
Dividends and Interest: \$ _____
Bonus and Commissions: \$ _____
Real Estate Income: \$ _____
Other Income: \$ _____
TOTAL INCOME: \$ _____

It is understood that this information will be held in strict confidence by the Broker, its agents and officers.
The undersigned certifies that this information is true and correct.

Signature: _____ **Date:** _____