

CONFIDENTIAL FINANCIAL STATEMENT

As of _____

Name _____ Occupation/Employment _____

Address _____ Business Address _____

Phone _____ Email _____

ASSETS Itemize on Schedules		LIABILITIES Itemize on Schedules	
Cash Checking, Savings Accounts and CDs (Schedule A)		Accounts Payable	\$
Government Securities, Stocks, Bonds and other Securities (Schedule B)		Notes to Financial Institutions and others (Schedule F)	\$
Cash Value of Life Insurance (Schedule C)		Real Property Mortgage Loans (Schedule G)	\$
Accounts and Notes Receivable		Interest and Taxes Due	\$
Salable Inventory		Other Debts (Itemize)	\$
Real Property * (Schedule D)			\$
Machinery and Equipment *			\$
Furniture and Fixtures *			\$
Motor Vehicles *			\$
Other Property Owned *(Schedule E)			\$
Other Assets (Itemize)			\$
			\$
			\$
		TOTAL LIABILITIES	\$
		NET WORTH (Total assets less liabilities)	\$
			\$
TOTAL ASSETS		TOTAL LIABILITIES AND NET WORTH	\$
STATEMENT OF INCOME		Prior Year	Current Year
Salaries, Wages, etc. from Employment (Occupation: _____)			\$
Income from Dividends and Interest			\$
Net Income from Rents			\$
Net Income from Other Investments			\$
Other Income			\$
TOTAL INCOME			\$
CONTINGENT LIABILITIES			
As an Endorser or Comaker (Describe)			
For Leases or Contracts (Describe)			
For Legal Claims Pending (Describe)			

This information is submitted for the purpose of assisting the NuVescor Group in evaluating on behalf of the undersigned persons, firms or corporations, the financial ability to purchase a business opportunity. The undersigned warrants that this financial statement is true and correct, may be verified where the NuVescor Group deems necessary and may be considered true and correct until written notice of a change is given to you by the undersigned.

Signature: _____ Signature: _____

Date Signed: _____ Date Signed: _____

SUPPORTING SCHEDULES

(Total in each schedule should agree with appropriate item on financial statement)

Use Additional Schedules, when necessary

SCHEDULE A - Checking and Savings Accounts and Certificates of Deposit

Depository	Contact	Type	Phone #	Account #	Balance
					\$
					\$
					\$
					\$
					\$
TOTAL VALUE CASH & SAVINGS					\$

SCHEDULE B - Securities

Description	Traded	Broker Name	Phone #	Account #	# Shares	Value Each	Total Value
							\$
							\$
							\$
							\$
							\$
							\$
							\$
							\$
TOTAL VALUE OF SECURITIES							\$

SCHEDULE C - Life Insurance

Name of Company	Insured	Beneficiary	Face Amount	Loans	Cash Value
					\$
					\$
					\$
TOTAL CASH VALUE OF INSURANCE					\$

SCHEDULE D -Real Estate Owned

Description/Location	Title Name	Acquired	Original Cost	Current Value
				\$
				\$
				\$
				\$
TOTAL VALUE OF REAL ESTATE OWNED				\$

SCHEDULE E - Other Property Owned

Description	Value	
	\$	
	\$	
	\$	
	\$	
TOTAL VALUE OTHER PROPERTY OWNED		\$

SCHEDULE F - Notes to Financial Institutions and Others

Creditor	Security	Due Date or Payment Schedule	Balance Owed
			\$
			\$
			\$
			\$
TOTAL OWED TO FINANCIAL INSTITUTIONS AND OTHERS			\$

SCHEDULE G - Real Property Mortgages

Mortgage Holder	Property Address	Maturity Date	Monthly Payment	Balance Owed
				\$
				\$
				\$
				\$
TOTAL REAL ESTATE MORTGAGES OWED				\$