

# 13 Constitution Road

# Sewell, NJ 08080 800-338-0778

[**www.newclientsinc.com**](http://www.newclientsinc.com/)

**Financial Statement As of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Cash $

Mortgages on Residence $

Stocks, Bonds $

Notes Payable-Automobiles $

Retirement, IRAs $

Other Liabilities $

Net Value of Businesses $

# Total Liabilities $

Value of Residence $

**Net Worth** $

Other Real Estate $

Automobiles $

Other Assets $

# Total Assets $

**FINANCING:** How do you plan to fund this purchase? (Check all that apply)  
Outside Loans: Y \_\_\_\_ Personal/Family Assets: Y \_\_\_\_ Seller Financing: Maybe\_\_\_\_

Are you presently in practice? Y\_\_\_\_\_\_ N\_\_\_\_\_

If Yes, annual billing amount: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you a CPA\_\_\_\_ EA\_\_\_ CFP\_\_\_\_ Other \_\_\_\_?

Have you ever purchased a practice before? Y\_\_\_\_ N\_\_\_\_

Have you ever filed for bankruptcy?

Have you ever been arrested or convicted of a felony?

What is your current credit score? \_\_\_\_\_\_\_\_ (Note: if you’ll be applying for bank financing this question must be answered).  
Print Name:

Signature:

Date:

# Please fax to 856-478-0345 or e-mail to [bruce@newclientsinc.com.](mailto:bruce@newclientsinc.com)