



CHR Group

### Confidential Buyer Profile

NAME: Last \_\_\_\_\_, First \_\_\_\_\_ Initial \_\_\_\_\_

ADDRESS: Street \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip Code \_\_\_\_\_

PHONE: Home \_\_\_\_\_ Business \_\_\_\_\_ Company \_\_\_\_\_

Job Description or title \_\_\_\_\_

Marital Status \_\_\_\_\_ Number of Dependents \_\_\_\_\_ Years in Area \_\_\_\_\_

Spouse's Name \_\_\_\_\_ Occupation \_\_\_\_\_

#### **BUSINESS AND PERSONAL BACKGROUND:**

Managed a business before?  Yes  No

Owned a business before?  Yes  No

Business \_\_\_\_\_ No. of Yrs. \_\_\_\_\_ When \_\_\_\_\_

Business \_\_\_\_\_ No. of Yrs. \_\_\_\_\_ When \_\_\_\_\_

Business \_\_\_\_\_ No. of Yrs. \_\_\_\_\_ When \_\_\_\_\_

Special Skills and/or training \_\_\_\_\_

Education \_\_\_\_\_

Hobbies \_\_\_\_\_

#### **PURCHASING INTERESTS: (Select all that apply)**

<u>OPERATION</u>	<u>CLASS OF BUSINESS</u>	<u>LOCATION</u>	<u>TIME FRAME</u>
<input type="checkbox"/> absentee	<input type="checkbox"/> contractor	<input type="checkbox"/> Bryan	<input type="checkbox"/> within 1 month
<input type="checkbox"/> corporation	<input type="checkbox"/> dealership	<input type="checkbox"/> College Station	<input type="checkbox"/> 1-3 months
<input type="checkbox"/> investment	<input type="checkbox"/> manufacturing	<input type="checkbox"/> Brazos County	<input type="checkbox"/> 3-6 months
<input type="checkbox"/> tax shelter	<input type="checkbox"/> retail	<input type="checkbox"/> Within _mi. of B/C	<input type="checkbox"/> over 6 months
<input type="checkbox"/> partnership	<input type="checkbox"/> service	<input type="checkbox"/> Other _____	
<input type="checkbox"/> sole prop.	<input type="checkbox"/> wholesale		
<input type="checkbox"/> _____	<input type="checkbox"/> _____		

Further describe the business sought \_\_\_\_\_

Time available to dedicate for business operation: \_\_\_\_\_

Will other family members participate in the business?  Yes  No

Define how: \_\_\_\_\_





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**Financial Statement Strictly Confidential**

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Assets \_\_\_\_\_

Cash On Hand and in Banks \_\_\_\_\_ \$ \_\_\_\_\_

Value of Businesses Owned \_\_\_\_\_

Other Stocks and Bonds \_\_\_\_\_

Real Estate \_\_\_\_\_

Other Assets (Itemize) \_\_\_\_\_

\_\_\_\_\_

TOTAL ASSETS \$

Liabilities \_\_\_\_\_

Notes Payable – Mortgage \_\_\_\_\_

TOTAL LIABILITIES \$

NET WORTH \$

Source Of Income \_\_\_\_\_

Annual Income \_\_\_\_\_ Husband \_\_\_\_\_ Wife \_\_\_\_\_ \$ \_\_\_\_\_

Dividends and Interest \_\_\_\_\_

Real Estate Income \_\_\_\_\_

Other Income \_\_\_\_\_

\_\_\_\_\_

TOTAL INCOME \$

The undersigned certifies that this information was provided by him and is true and correct.

Date: \_\_\_\_\_

Signature: X \_\_\_\_\_ Phones/Fax \_\_\_\_\_