

# PRELIMINARY EVALUATION REPORT

DATE: \_\_\_\_\_

## CLIENT INFORMATION

Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Shipping Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Type of Business: \_\_\_\_\_

How Long in Business: \_\_\_\_\_ How Long at Address: \_\_\_\_\_

Gross Revenue Last 12 Months: \_\_\_\_\_

Approximate Number of Customers: \_\_\_\_\_

Approximate Number of Customers to be Factored: \_\_\_\_\_

Volume Expected to be Factored Annually: \_\_\_\_\_

Please Explain Company's Needs: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Three Largest Customers:

Name: \_\_\_\_\_

Total \$ volume last 12 months: \_\_\_\_\_ Total credit offered: \_\_\_\_\_

Name: \_\_\_\_\_

Total \$ volume last 12 months: \_\_\_\_\_ Total credit offered: \_\_\_\_\_

Name: \_\_\_\_\_

Total \$ volume last 12 months: \_\_\_\_\_ Total credit offered: \_\_\_\_\_

**Three Representative Customers You Wish to Factor:**

Name of Business: \_\_\_\_\_  
Type of Business: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Average Invoice Amount: \_\_\_\_\_  
Total Credit Offered Last 12 Months: \_\_\_\_\_ Credit Terms: \_\_\_\_\_  
Dollar Volume of Receivables Outstanding for:  
    0-30 days \_\_\_\_\_ 31-60 days \_\_\_\_\_  
    61-90 days \_\_\_\_\_ 91 + days \_\_\_\_\_  
Amount of Invoices You Wish to Factor Monthly \$ \_\_\_\_\_

Name of Business: \_\_\_\_\_  
Type of Business: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Average Invoice Amount: \_\_\_\_\_  
Total Credit Offered Last 12 Months: \_\_\_\_\_ Credit Terms: \_\_\_\_\_  
Dollar Volume of Receivables Outstanding for:  
    0-30 days \_\_\_\_\_ 31-60 days \_\_\_\_\_  
    61-90 days \_\_\_\_\_ 91 + days \_\_\_\_\_  
Amount of Invoices You Wish to Factor Monthly \$ \_\_\_\_\_

Name of Business: \_\_\_\_\_  
Type of Business: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Average Invoice Amount: \_\_\_\_\_  
Total Credit Offered Last 12 Months: \_\_\_\_\_ Credit Terms: \_\_\_\_\_  
Dollar Volume of Receivables Outstanding for:  
    0-30 days \_\_\_\_\_ 31-60 days \_\_\_\_\_  
    61-90 days \_\_\_\_\_ 91 + days \_\_\_\_\_  
Amount of Invoices You Wish to Factor Monthly \$ \_\_\_\_\_

How Many Total Customers Do Wish To Factor Initially: \_\_\_\_\_  
Total \$ Amount; \_\_\_\_\_

Other Information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By: \_\_\_\_\_

Title: \_\_\_\_\_