



No Obligation / No Cost
Creditor Analysis & Assessment
For Business Debt Relief

Creditor's Name <i>(optional)</i>	Approximate Balance Due	Month Past Due	Party attempting to collect			Comments
			Creditor	Collection Agency or Attorney	Lawsuit	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

GRAND TOTAL:

How much could you consistently commit to satisfy these debts on a monthly basis? \$ _____

How much do you have in receivables over 90 days? \$ _____

Your Company _____ Address _____ City _____ State _____ Zip _____

Your name _____ Title _____ Phone# _____ Fax# _____ Email Address _____

FAX THIS PAGE TO CHARLES EVANS / CORPORATE TURNAROUND @ 201-843-5272