



Buyer Registration

To properly match your requirements to those of our Client, please tell us about yourself and your acquisition experience. All information you provide is **CONFIDENTIAL** and may only be released to the Client (and their advisors). Buyer authorizes L. P. Grasso & Company, Inc. to verify such information with the parties named. Please include additional pages if necessary.

Complete these questions for Buyer Registration

Buyer Company's name _____ Date _____

Individual's name _____ Title _____

Company Address _____ Phone _____

City _____ State/Prov _____ Zip / Postal _____ Country _____ Fax _____

Home Address _____ Home Phone _____

City _____ State/Prov _____ Zip / Postal _____ Country _____ Home Fax _____

Email address _____ Company Fed ID# _____

Referred by _____ Individual's SS# _____

BUYER: This Agreement is made on behalf of the company the individual both parties

CONTACT: Where may we contact you? work address work phone home address home phone

1) **CURRENT INDUSTRIES:** Indicate the industries you are engaged in now.

- Basic (agriculture, mining, etc.) Manufacturing Retail Utilities
- Finance Real Estate Services Wholesale

Note details of business you are engaged in now. (Indicate SIC # if known) _____

2) **ACQUIRED COMPANIES:** Indicate the industries in which you have made an acquisition. Does Not Apply

- Basic (agriculture, mining, etc.) Manufacturing Retail Utilities
- Finance Real Estate Services Wholesale

Indicate any other industry acquisitions you have made. _____

3) **DISTRIBUTION AREA:** What geographic market area(s) are you looking to add to your company's distribution? Please number in priority.

___ Local (New York) ___ Regional (NY/NJ/CT) ___ Sectional (NE States) ___ National ___ International ___ Other _____

4) **YOUR HEADQUARTERS:** What geographic area(s) are covered by your company's headquarters? Rank by priority.

___ Local (New York) ___ Regional (NY/NJ/CT) ___ Sectional (NE States) ___ National ___ International ___ Other _____

(OVER)

- 5) **MANAGEMENT:** Do you require management to stay after the sale? Yes Preferred No Maybe Doesn't matter
- 6) **TURN AROUND:** Will you consider purchasing a turn-around business? Yes Preferred No Maybe Doesn't matter
- 7) **UNIONS:** Will you consider a company with unions? Yes Preferred No Maybe Doesn't matter
- 8) **EMPLOYEES:** Minimum # of employees the company should have? _____ Employees Don't Care
- 9) **COMPANY AGE:** What is minimum age of company you will consider? _____ Years Don't Care
- 10) **REVENUE SIZE:** Revenue range you will consider? Minimum _____ Maximum _____
- 11) **PROFIT:** Recast EBIT range you will consider (enter \$ or %)? Minimum _____ Maximum _____
- 12) **PRICE:** Purchase price of Company you will consider? Minimum _____ Maximum _____
- 13) **CASH:** Out-of-pocket amount you are willing to invest? Minimum _____ Maximum _____
- 14) **PURCHASE TERMS:** Indicate terms you require? Please number in priority, leave blank if not applicable.
 ___ Cash ___ Lender financing ___ Owner financing ___ Stock exchange ___ Trade
- 15) **REFERENCES:** So that we might inform our Client, please provide the following references:
- Banker _____ Bank _____ Phone # (____) _____
- Accountant _____ Firm _____ Phone # (____) _____
- Attorney _____ Firm _____ Phone # (____) _____
- 16) **PRINCIPALS:** Please list other officers, investors or partners who may participate with you on an acquisition?
- Name _____ Title/role _____ Phone # (____) _____
- Name _____ Title/role _____ Phone # (____) _____
- Name _____ Title/role _____ Phone # (____) _____
- 17) **FINANCIAL RESOURCES:** If you are a company, please include your most recent annual financial statement. If you are an individual, please include a current net worth statement. OR, in the alternate, you may include a letter explaining your net worth, or the financial resources under your control. This is **required**.

Approve here for Buyer Registration

There is **No Fee** for this registration.

Signature **X** _____ Date _____

You may arrange a free consultation at the offices of L. P. Grasso and Company, Inc. to discuss your criteria, your preferences and the **Preferred Buyer Program**. This proactive approach includes a "Buyer Search" of companies meeting your criteria which are not currently listed. Selected companies will be contacted on your behalf and respondents brought to your attention.

Comments:

Please Return To:
L. P. Grasso & Company, Inc.
751 State Street,
Schenectady, NY 12307
Voice: 518-372-6477 Fax: 518-372-0059