



Confidential Qualification Report

Bruster's is passionate about creating superior products, enhancing employess skill and striving to achieve customer satisfaction in an atmosphere that is simple and fun.

CONFIDENTIAL QUALIFICATION REPORT

Name	Social Security #
Spouse Name	Spouse SS #
Home Address	Home Telephone
City	State, Zip

Date of Birth	Rent Home?	Own Home?	How Long?	# of Dependents
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Are you a citizen of the USA? Yes _____ No _____	If not, what country?	Green Card #
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Business Experience (present or last position first)

Firm Name	Date of Employment (From/To) /
Address	
Telephone	Nature of Business
Position & Responsibilities	
Firm Name	Date of Employment (From/To) /
Address	
Telephone	Nature of Business
Position & Responsibilities	
Firm Name	Date of Employment (From/To) /
Address	
Telephone	Nature of Business
Position & Responsibilities	

Education

High School Graduate Yes _____ No _____	College Graduate Yes _____ No _____ Last Year Completed ___1___2___3___4
Business & Professional Organizations	

Personal

Have you ever been a principal in bankruptcy adjudication? Yes _____ No _____ If yes, please state details
Have you ever been convicted of a felony? Yes _____ No _____ If yes, please state details

- * If partners would be involved, please enclose a Confidential Qualification Report and resume for each.
- * If you are inquiring as a representative of a company or entity, please attach a description of its experience, its owners and its objectives.
- * If additional space is required, please attach separate papers when necessary.

Personal Financial Statement

I make the following statement of all my assets and liabilities as of the _____ day of _____, 20____.
 (Please answer all questions using "no" or "none" where necessary.)

ASSETS	
Cash on hand, and restricted in banks (see Schedule 1 on page 4)	\$
US Government and marketable securities (see Schedule 2 on page 4)	
Accounts, loans and notes receivable (see Schedule 3 on page 4)	
Life Insurance, cash surrender value-do not deduct loans (see Schedule 4 on page 5)	
Nonmarketable securities (see Schedule 5 on page 5)	
Retirement accounts	
Real Estate (see Schedule 6 on page 5)	
Automobiles registered in own name	
Other assets (itemize)	
TOTAL ASSETS	\$

LIABILITIES AND NET WORTH	
Notes payable to banks, unsecured direct borrowing only (see Schedule 1 on page 4)	\$
Notes payable to banks, secured direct borrowing only (see Schedule 1 on page 4)	
Notes payable to others, unsecured	
Loans against life insurance (see Schedule 4 on page 5)	
Accounts payable	
Interest payable	
Taxes and assessments payable (see Schedule 6 on page 5)	
Mortgages payable on real estate (see Schedule 6 on page 5)	
Brokers margin account (see Schedule 5 on page 5)	
Other liabilities (itemize)	
Any pending lawsuits or judgments?	
TOTAL LIABILITIES	
TOTAL ASSETS - TOTAL LIABILITIES = NET WORTH	\$

Personal Financial Statement (continued)

SOURCE OF INCOME		PERSONAL EXPENSES (please list)	
Salary	\$		\$
Bonus			
Dividends			
Real Estate income			
Other income (itemize)			
TOTAL	\$		\$

CONTINGENT LIABILITIES	
As endorsed or co-maker	\$
On leases or contracts	
Legal claims	
Provision for federal income taxes	
Other special debt (itemize)	
TOTAL	\$

Schedules

NO. 1: BANKING RELATIONS (a list of all bank accounts, including savings and loans)

Name and Location of Bank	Cash Balance	Outstanding Loans	Maturity of Loan	How Endorsed, Guaranteed or Secured	Account #

NO. 2: US GOVERNMENT AND MARKETABLE SECURITIES

Number of Shares (stocks) Face Value (bonds)	Description of Security	Registered in Name of	To Whom Pledged	Market Value	Account #

NO. 3: ACCOUNTS, LOANS AND NOTES RECEIVABLE (a list of the largest amounts owing to me)

Name and Address of Debtor	Amount Owning	Age of Debt	Description of Nature of Debt	Description of Security Held	Date Payment Expected

Schedules (continued)

NO. 4: LIFE INSURANCE

Name of Insured	Name of Beneficiary	Name of Insurance Co.	Type of Policy	Face Amount of Policy	Total Cash Surrender Value	Total Loans Against Policy	Amt. Of Yearly Premium	Is Policy Assigned?

NO. 5: NON-MARKETABLE SECURITIES AND RETIREMENT ACCOUNTS

Number of Shares(stocks) Face Value(bonds)	Description of	Registered in Name of Security	Amount Invested	Income Received Last Year	To Whom Pledged	Account #
Balance of Margin Account				\$		

NO. 6: REAL ESTATE - The legal and equitable title to all real estate listed in this statement is solely in the name of the undersigned, except as follows:*

Description or Street Number	Title in Name of	Date Acquired	Cost	Due Dates & Amounts of Pmt	Mortgage Balance	Present Market Value	Unpaid Taxes Year / Amt
							/
							/
							/

*For partial real estate interests, attach separate schedule.

Personal References (not relatives or former employers)

Name		Name	
Address		Address	
Phone	Occupation	Phone	Occupation

Experience

Have you ever been involved in a franchise? Yes _____ No _____ If yes, what company?

Do you now or have you ever owned or had an interest in a food service operation? Yes _____ No _____
If yes, please state details.

Outline briefly any past experience that you feel would be beneficial in operating a Bruster's.

Location Preferences

1	2	3
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What prompted you to inquire about investing in Bruster's?

BRUSTER'S ACKNOWLEDGEMENT FORM

Master Franchise

THE UNDERSIGNED ACKNOWLEDGES AND AGREES:

1. THIS PERSONAL FINANCIAL STATEMENT FORM HAS BEEN SUPPLIED TO HIM/HER AS A CONVENIENCE AND THAT BRUSTER'S SHALL NOT INCUR OBLIGATION OR LIABILITY BY RECEIPT OF THE FORM.
2. ONLY THE PRESIDENT OF BRUSTER'S HAS THE AUTHORITY TO APPROVE THE UNDERSIGNED FOR A BRUSTER'S MASTER FRANCHISE.
3. ANY MATERIAL MISREPRESENTATIONS, WHETHER INTENTIONAL OR UNINTENTIONAL, IN INFORMATION SUPPLIED BY THE APPLICANT IN THIS FORM SHALL BE GROUNDS UPON WHICH BRUSTER'S MAY IMMEDIATELY TERMINATE ANY AGREEMENTS EXECUTED BY THE UNDERSIGNED AND BRUSTER'S.

NOTICE TO THE APPLICANT

The following disclosures are being made pursuant to the requirements of the Fair Credit Reporting Act.

1. An investigative consumer report may be made in connection with your application for a Bruster's Master Franchise, which report may include information as to your character, general reputation, personal characteristics and mode of living obtained from or through personal interviews with persons with whom you are acquainted or who may have knowledge concerning any such items of information.
2. In the event such an investigative consumer report is procured, upon your written request of this Company received within a reasonable period of time from the date hereof, you will be provided a complete and accurate disclosure of the nature and scope of the investigation requested.

Receipt of an exact copy of the above Notice is hereby acknowledged this _____ day of _____, 20 _____

Applicant Name (print) _____

Signature _____ Date _____

Witness _____ Date _____

Please complete, sign and return to:
Lori Molnar / Franchise Development
Bruster's Real Ice Cream
730 Mulberry St. Bridgewater, PA 15009
Fax: (724)774-0666

