

**FINANCIAL INSTITUTION REFERENCE SHEET**

**Instructions to Contractor:** Include with your proposal a reference sheet for each financial institution that you have a business account with. This sheet may be sent to the banking institution(s) in regards to a determination of contractor responsibility as part of the evaluation for award of this solicitation.

*TO BE FILLED OUT BY CONTRACTOR:*

COMPANY'S NAME: \_\_\_\_\_

Point of Contact (POC) Name: \_\_\_\_\_

POC Phone Number: \_\_\_\_\_

INSTITUTION NAME:

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

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

POC Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

I give permission for the following information regarding my account(s) at your institution to be released to representatives of the 5th Contracting Squadron, Minot AFB, North Dakota.

Name/Title \_\_\_\_\_ Signature/Date \_\_\_\_\_

DO NOT HAVE THIS SECTION FILLED OUT IF YOUR FIRM IS SELECTED AS THE POTENTIAL AWARDEE, THIS FORM WILL BE SENT TO YOUR BANKING INSTITUTION FOR COMPLETION.

*TO BE FILLED OUT BY FINANCIAL INSTITUTION:*

*Please give amounts as a range- i.e. low four figures, mid six figures, etc.*

Average monthly balance in checking: \_\_\_\_\_

Average monthly balance in savings: \_\_\_\_\_

Amount of any current loans: \_\_\_\_\_

Amount of any lines of credit: \_\_\_\_\_

Any late payments or NSF's: \_\_\_\_\_

How long with this institution: \_\_\_\_\_

Credit rating with this institution: \_\_\_\_\_

I verify that the information provided above is current as of \_\_\_\_\_.

Name/Title \_\_\_\_\_ Signature/Date \_\_\_\_\_