

# Supplier Financial Wellness Evaluation

Date: [Insert Date]

To: [Supplier Name]

Address: [Supplier Address]

Dear [Supplier Contact Name],

We are conducting a Financial Wellness Evaluation of our key suppliers to ensure a strong and sustainable partnership. As part of this process, we request your cooperation in providing the following information:

1. Latest Financial Statements (last 2 years)
2. Cash Flow Projections for the next 12 months
3. Details of any outstanding debts
4. Credit Rating Information
5. Any additional information that reflects your current financial situation

Please submit the requested information by [Insert Deadline Date] to allow us to complete our evaluation in a timely manner. All provided information will be treated with confidentiality.

We appreciate your cooperation and look forward to continuing our successful partnership.

Sincerely,

[Your Name]

[Your Position]

[Your Company Name]

[Your Contact Information]