

Vendor Financial Stability Assessment

Date: [Insert Date]

To: [Vendor Name]

Address: [Vendor Address]

Dear [Vendor Contact Name],

As part of our ongoing commitment to ensure robust financial partnerships, we are conducting a Vendor Financial Stability Assessment. This assessment aims to evaluate the financial health and stability of our vendors.

We kindly ask you to provide us with the following information:

- Current Financial Statements (Balance Sheet, Income Statement)
- Tax Returns for the last two fiscal years
- Details of any significant changes in ownership or management
- Any relevant financial forecasts or projections

Please submit the requested documents by [Insert Deadline]. Your cooperation is vital for maintaining a transparent and secure business relationship.

Thank you for your prompt attention to this matter. Should you have any questions, please do not hesitate to reach out.

Sincerely,

[Your Name]

[Your Title]

[Your Company]

[Your Contact Information]