

4allcashout.com

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APPLICATION FOR ACCOUNTS RECEIVABLE PROGRAMS

1. Legal name of company (as shown on the Articles of Incorporation or Partnership Agreement)

Address _____

City _____ State _____ Zip Code _____ County _____

Phone Number () _____ Fax Number () _____

Contact/Position _____ Email: _____

2. Your business is a: Corporation LLC Proprietorship Partnership Other _____

3. How long have you been in business? _____ Federal I.D. # _____

4. Describe your business _____

5. What is your average monthly billing? _____

6. How much of your average monthly billing do you wish to finance? _____

7. What is the average size of your invoices? _____ Largest _____ Smallest _____

8. Are any of your receivables progress billings? (In other words, do you bill in "as-completed" phases for larger products?) Yes No

9. List your most important major customers (customers will not be contacted at this time):

Company Name, Street Address, City, State and Phone Number

1) _____

2) _____

3) _____

4) _____

5) _____

10. Do you have any outstanding loans? Yes No

11. Have any receivables been pledged as collateral? Yes No

12. Name of Institution(s) Loan Amount _____ and Terms _____

13. Are your federal Yes No, State Yes No, and payroll taxes current? Yes No

If not, please list amounts owed and what for: _____

Federal balance owed _____ State balance owed _____

Any liens placed? Yes No

Do you have a payment plan? Yes No Monthly payment _____

Are you currently involved in any type of litigation or lawsuits? Yes No

If yes, please describe _____

14. Company's Attorney Name _____ Phone Number () _____

15. Company's Accountant Name _____ Phone Number () _____

16. Have you previously financed/factored your accounts receivables? Yes No

17. If yes, what is the name of the previous finance company? _____

Please attach a detailed accounts receivable aging report.

I attest that the statements in this application for financing are true and correct to the best of my knowledge. I authorize **4allcashout.com** and/or any of its affiliates to verify any or all of these statements in any way it may choose and the right to procure all credit reports of the principals of the applicant company.

Prepared and Consented By (Printed Name): _____

Signature X _____

Title _____

Date _____