

## Application for Purchase Order Financing

Please fill out the following and **fax to 212-658-9717**. You may also email it to [info@advancedfundingsolutionsllc.com](mailto:info@advancedfundingsolutionsllc.com). Please also include a copy of your Accounts Receivable Aging Schedule, Accounts Payable Schedule, Financial Statements (if available), a business description, a written description of your fulfillment process, a Customer List and any other information you have that may be pertinent. (Please write clearly in **CAPITAL** letters)

### BUSINESS INFORMATION

EXACT LEGAL NAME OF BUSINESS ENTITY		FED TAX NO.
ADDRESS	CITY, STATE, ZIP	COUNTY
TELEPHONE	FAX	EMAIL
WEBSITE ADDRESS	NUMBER OF YEARS IN BUSINESS	YEARS UNDER PRESENT CONTROL

### OWNERSHIP INFORMATION

BUSINESS STRUCTURE:	<input type="checkbox"/> PROPRIETORSHIP	<input type="checkbox"/> S-CORP	<input type="checkbox"/> LLP	<input type="checkbox"/> TRUST
	<input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> C-CORP	<input type="checkbox"/> LLC	
PRINCIPAL'S NAME:	TITLE	% OWNERSHIP	HOME PHONE NO.	SOC. SEC. NO.
HOME ADDRESS (STREET)	CITY	STATE, ZIP	<input type="checkbox"/> OWN <input type="checkbox"/> RENT	DRIVERS LIC. NO.
ANNUAL SALARY: \$	EST. NET WORTH: \$	EMAIL:		

### INDUSTRY INFORMATION

INDUSTRY:	HAVE YOU FACTORED BEFORE?:	IF SO, WITH WHOM?
	<input type="checkbox"/> YES <input type="checkbox"/> NO	

### FINANCIAL INFORMATION

ANNUAL SALES: \$	OPEN RECEIVABLES: \$	APPROX. # OF CUSTOMERS	AVG. INVOICE AMOUNT
ANY TAXES PAST DUE? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF SO, DESCRIBE:		
ANY ASSETS NOW ASSIGNED, PLEGGED OR LIENED AS COLLATERAL FOR LOANS? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF SO, DESCRIBE:		

### TRANSACTION DESCRIPTION

PO AMOUNT: \$	LOAN REQUEST: \$	DATE FINANCING REQUIRED	EXPECTED DELIVERY DATE
---------------	------------------	-------------------------	------------------------

ADDITIONAL COMMENTS:

---

In addition to this form, applicants must provide the following information: a) Copies of Purchase Orders including contact information for customers b) a detailed budget to fulfill the purchase orders that breaks down all costs that will be incurred, c) a timeline for completion of the Purchase Orders that includes material ordering dates and d) Accounts receivable and payable aging schedules. Please fill out the above and **fax to 212-658-9717** or email it to [info@advancedfundingsolutionsllc.com](mailto:info@advancedfundingsolutionsllc.com). (Please write clearly in **CAPITAL** letters)