



Finance One, Inc.
888 S. Figueroa St. Suite 1100 Los Angeles, CA 90017
Tel: 213-430-4888 Fax: 213-430-4877
E-mail: credit@finone.com Web: www.finone.com

INFORMATION NEEDED FOR TERM APPROVAL

The following information is needed for your order to be considered for term sale. Please fax or e-mail as much of the information listed below that you have available:

1. Most recent year-to-date Financial Statements (Income Statement and Balance Sheet)
2. Most recent full year's Financial Statements (Income Statement and Balance Sheet)
3. Signed Credit Release Authorization Form (see attached)
4. Signed Customer Account Information Form (see attached) or Credit Reference Sheet

Fax number: 213-430-4877

E-mail: credit@finone.com

Attn: Marilou Benasa Tel: 213-534-2905



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CREDIT RELEASE AUTHORIZATION

I/We hereby authorize FINANCE ONE, INC. and its agent MILBERG FACTORS, INC. to verify any credit information from whatever source it deems appropriate and I further authorize my/our banks, trade references and financial institutions to release by telephone or fax pertinent information. All obtained credit information will be treated confidentially and will be used only in assisting FINANCE ONE, INC. and its agent MILBERG FACTORS, INC. in securing credit approval and factor financing. A copy of fax of this CREDIT RELEASE AUTHORIZATION may be deemed to be the equivalent of original.

COMPANY NAME: _____

BY: _____
Signature

Print Name

Title

Date: _____



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CUSTOMER ACCOUNT INFORMATION

BUSINESS LEGAL NAME		DBA NAME, IF ANY
BUSINESS ADDRESS		TEL:
		FAX:
BUSINESS ENTITY: CORP () LLC () LLP () SOLE PROPRIETORSHIP () PARTNERSHIP ()	DUNS NUMBER	YEAR ESTABLISHED & STATE

FINANCIAL CONTACT PERSON	TITLE
(PLEASE PROVIDE THE CONTACT INFORMATION OF THE PERSON WHO CAN ANSWER QUESTIONS CONCERNING THE FINANCIAL/CREDIT SITUATION OF YOUR COMPANY)	TEL:
	E-MAIL:

BANK REFERENCE – BANK NAME	BRANCH
CONTACT PERSON FOR BANK REFERENCE	TEL:
	FAX:

CPA FIRM NAME	E-MAIL:
CONTACT PERSON	TEL:
	FAX:

DECLARATION

The information supplied in this application and all forms and documents submitted to Finance One, Inc. in connection herewith is true and correct to the best of my knowledge and belief. I/We hereby authorize Finance One, Inc. and its agent Milberg Factors, Inc. to investigate my/our financial responsibility and creditworthiness including inquiry into credit agencies. I /We will provide additional information, as Finance One, Inc. and its agent Milberg Factors, Inc. deem necessary and requests including, but not limited to financial statement, tax returns, etc.

SIGNED BY: _____ TITLE: _____ DATE: _____

PRINT NAME: _____