

Because Time Is Money- Request A Funding Proposal Now!

For a no obligation funding proposal detailing the amount and terms of credit your business qualifies for, **please fax completed form along with one credit card statement and one bank statement to 214-292-9641** or mail to:

Quotation Request, Cash Flow Financial
6101 Long Prairie Rd., Ste 744, Flower Mound, Tx 75028

Date: _____

Type of Entity (Circle): Corporation Limited Liability Partnership Limited Partnership Limited Liability Partnership Sole Proprietorship

Business Legal Name: _____ D/B/A Name: _____

Physical Address: _____ City: _____ State: _____ Zip: _____

Federal Tax ID: _____ Date Business Started (mm/yy) _____ Length Of Ownership _____

Contact Person: _____ Phone: _____ Fax: _____

Email: _____ Web Site: _____

Own or Lease Building: _____ Lease Start Date: _____

Lease Term: _____ Monthly Rent / Mortgage: _____

OWNERSHIP STRUCTURE

Principal #1 (_____ %) Ownership

Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Soc Sec# _____

Date Of Birth: _____ Cell Phone: _____

Principal #2 (_____ %) Ownership

Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Soc Sec# _____

Date Of Birth: _____ Cell Phone: _____

Provide Last 4 Months Of Sales Totals

Month	Total Sales	Credit Card Sales
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____
4 _____	_____	_____

ATTACH TWO COMPLETE CREDIT CARD STATEMENTS AND ONE BANKING STATEMENT WITH THIS FORM

I authorize Cash Flow Financial (CFF) to make inquires as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). I hereby authorize the release to CFF any and all information CFF may require at any time for any purpose related to our credit application/transaction. I further authorize CFF to release such information to any entity it deems necessary for any purpose related to our credit application/transaction with it.

Principal#1 Signature: _____

Principal#2 Signaure: _____



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OWNERSHIP STRUCTURE Principal #1 (_____ %) Ownership

Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Soc Sec# _____

Date Of Birth: _____ Cell Phone: _____

Principal #2 (_____ %) Ownership

Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Soc Sec# _____

Date Of Birth: _____ Cell Phone: _____

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