QUICK QUALIFIER –

Please complete the following information and FAX to Barbara Griffith @ (714) 573-9806. She can also be reached @ (714) 573-9804 . (800) 291-8777 - e-mail: <u>bgriffith@socalleasing.com</u>

COMPANY INFORM	ATION:					
Name:			Years in Bu	siness:		
Address:						
Phone #:		F	AX #:			
COMPANY STRUCT	URE:	C-Corp:	_S-Corp:	Part:	Sole:	
BANKING INFORMA	ATION:					
Bank Name:						
Account #:	Account #: Phone #:					
TRADE INFORMAT	ION:					
Company:		С	ontact & Phon	ne #:		
Company:	Company: Contact & Phone #: Company: Contact & Phone #:					
OWNERSHIP INFOF	RMATIO	N:				
Name:		%:	SSN#			
Name: Name:		%:	SSN#			
Tentative Equipment:				Cost: \$		
Tentative Equipment: Requested Term:	24 Mo.	36 Mo.	48 Mo.	60 Mo		

At Southern California Leasing, we have long recognized that the structure and objectives of our client's capital requirements are unique and demand more than a "one size fits all" orientation. That is why we have assembled a comprehensive product offering 48 hour credit approvals, and custom tailored solutions to address almost any financial need that midsize business may face.

Southern California Leasing is focused on delivering capital solutions that are right on target for most of your financing requirements.

I hereby authorize Southern California Leasing and or its nominee to investigate the references herein. All credit information submitted herewith is true and correct.

	Signature:	Title:	Date:
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