

# Heartland Capital Investments LLC

706 Woodbine, Suite C, St. Joseph, Missouri 64507  
 Phone: (816) 671-0464 Facsimile: (816) 676-1900

## ACCOUNTS RECEIVABLE FINANCING PRELIMINARY APPLICATION

### Client Information PLEASE TYPE OR PRINT

REGISTERED LEGAL Name of Company & d/b/a If Applicable		Date Established	# of Employees
Complete Address		City, State, Zip & County	
Telephone	Fax Number	Federal I.D. # / SS #	Organization#
Company Officer & Title	<input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> Corporation <input type="checkbox"/> LLC State of Incorporation _____		
Describe Your Business and Your Customers			
How Did You Hear About Us?			

Monthly Sales Volumes	Terms of Sale	Number of Clients	# Invoices/ Month
	Do you ship on consignment? Y N		
Total A/R Right Now	Explain any A/R Pledge as Collateral		Had Debt Write-off Last Year?
Monthly Volume to Factor & Frequency	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly	Previously Factored Receivables?	With What Company?

### LIST ALL OUTSTANDING LOANS

Amount of Loan	Monthly Payment	Name of Lender	Collateral

**COMPANY BANK REFERENCES (PAST TWO YEARS)**

Name of Bank & Branch	City, State	Phone	Contact Officer

**TRADE REFERENCES**

Name of Supplier/Company	Complete Address	Contact Person	Phone

**FIVE LARGEST CUSTOMERS, THEY WILL NOT BE CONTACTED INITIALLY. ATTACH AN AGING OF ACCOUNTS RECIEVABLE**

Company Name	City & State	Phone	Monthly Sales	Invoice Size Range

**INFORMATION REGARDING YOUR COMPANY**

<b>Name of Your Attorney</b>	<b>Complete Address</b>	<b>Phone</b>
_____	_____	_____
<b>Name of Your Accountant</b>	<b>Complete Address</b>	<b>Phone</b>
_____	_____	_____
Do you <input type="checkbox"/> lease or <input type="checkbox"/> own company office space? Monthly Rental or Mortgage _____ Lease Period _____		
Landlord/Mgmt Company or Mortgager & Complete Address & Phone Number:		

**INFORMATION REGARDING YOUR OFFICES, PARTNERS, OR GUARANTORS**

<b>Name</b>	<b>Title</b>	<b>Social Security #</b> — — —	<b>Birthday</b>
<b>Complete Home Address</b>			<b>Phone</b>
<b>Name</b>	<b>Title</b>	<b>Social Security #</b> — — —	<b>Birthday</b>
<b>Complete Home Address</b>			<b>Phone</b>
Have any officers or owners of your company ever been convicted of a felony?		— Yes	— No
Have any officers or owners of your company ever been involved in a bankruptcy?		— Yes	— No

**FINANCIAL AND OPERATIONAL DATA**

1) **The latest two years of financial statements (audited, if available), most recent interim financial statements, and the last two years of Corporate tax returns. (Please submit with preliminary application).**

2) **An overview of the company and a description of its management team and their experience. (Please submit on a separate page with preliminary application.)**

3) **Desired amount of financing and proposed use of proceeds:**

\_\_\_\_\_

\_\_\_\_\_

4) **A current Aging of your Accounts Receivable in 30 day increments broken out by payor type (see example below, please submit with preliminary application.):**

<u>Payor Class</u>	<u>Days Outstanding</u>				
Debtor Name	0-30	31-60	61-90	91-120	120-over
Example Client Name					
Example Client Name 2					
Other Company (specify)					

We hereby authorize you, to whom this application is made, or your agents, to immediate financial responsibility and credit worthiness and will provide financial statements, tax returns, as necessary. I/We grant you the right to pressure any and all credit reports pertaining to any party listed in this application, including but not only all principals.

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_