THE INTERFACE FINANCIAL GROUP

A Division of Mohave Capital Funding, L.L.C.
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A96.01 SELLER'S APPLICATION

Please provide us with the following background information on yourself and your company.

1. Business Name (as in Articles of Incorporation/Organization, or Certificate of Limited or General Partnership)_____
2. Assumed/Fictitious Business Name (if any)_____
3. Is the Business Incorporated/Organized ☐ Yes ☐ No
4. Business Form: ☐ Corp. ☐ LLC ☐ LP ☐ GP ☐ Sole Proprietor
5. When and Where Registered: Date _____ State _____ County_____
6. Full Mailing Address (Head Office) _____
   _____ Phone _____ Fax _____
7. What Does the Business Do?_____

8. Applying Shareholder, Director, Officer, Member, Partner:
   Full Name _____ Social Security No. _____

   Full Home Address _____
   Home: Own ☐ Rent ☐ Phone _____ Cell_____
   Status: (Check All that Apply) ☐ Shareholder ☐ Director ☐ Officer ☐ Member ☐ Partner
   Ownership Percentage _____%

9. Are you current with:-
   Federal and State Income Tax? ☐ Yes ☐ No If No, Amount in Arrears $_____
   State and Local Sales Tax? ☐ Yes ☐ No If No, Amount in Arrears $_____
   Employee Deductions? ☐ Yes ☐ No If No, Amount in Arrears $_____

10. Do you have any bankruptcies, liens, judgements or litigation?_____ If so, explain_____
    _____

11. Name of Company Bank _____ How Long with Bank? _____
12. Full Mailing Address _____
13. Account Number _____ Name of Bank Officer _____ Phone _____

14. Total Amount of Receivables Now Open $ _____ Average Monthly Sales? $ _____
15. Approximate Number of Active Customers _____ Terms of Sale_____
16. Are You Discounting Receivables Now or in the Past? Yes _____ No_____
    If Yes, With What Company? _____
17. Are Receivables Pledged as Collateral? Yes___ No___ If Yes, to Whom? _____
18. What Amount Do You Intend to Sell On a Monthly Basis? $ _____

The undersigned hereby warrants that all of the above information is true and correct in every aspect. The undersigned further hereby warrants that all financial statements accurately represent in every respect, the true and correct financial condition of the parties that are the subject of this application. The undersigned hereby authorizes The Interface Financial Group to gather and use, from time to time, without the undersigned's knowledge, any and all financial and/or credit information relating to the business entity that is the subject of this application that can be obtained from any source whatsoever including, but not limited to, banks, trade associates and creditors. The undersigned also hereby authorizes The Interface Financial Group to investigate the personal credit history of the undersigned and obtain credit bureau reports on the undersigned from time to time at The Interface Financial Group's sole discretion.

Dated_____ Signed_____ _____

Title _____ _____