

Please print this form and complete the information. Fax completed form to 703-827-7033 or scan and email to contact@wincreek.com.

**COMPANY**

BRIEFLY DESCRIBE THE NATURE OF YOUR PRODUCT OR SERVICE  _____
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BUSINESS NAME _____		TELEPHONE _____
ADDRESS _____		FAX _____
CITY, STATE, ZIP _____	PARTNERSHIP _____	OTHER _____
CORPORATION _____	STATE OF INCORPORATION _____	FEDERAL TAX ID # _____
D/B/A NAME, IF APPLICABLE _____		CCR TPIN # _____
IF CCR TPIN # APPLICABLE – PLEASE FURNISH MYINVOICE USER ID # AND MYINVOICE PASSWORD _____		YEAR COMPANY FOUNDED/# OF EMPLOYEES _____

**COMPANY OFFICERS/OWNERSHIP**

<b>PRESIDENT AND/OR MAJORITY OWNER (10% OR &gt; SHAREHOLDER)</b>		
NAME _____		
ADDRESS _____		
CITY, STATE, ZIP _____	TELEPHONE _____	
SOCIAL SECURITY # _____	% OF OWNERSHIP _____	
<b>VICE PRESIDENT AND/OR MAJORITY OWNER (10% OR &gt; SHAREHOLDER)</b>		
NAME _____		
ADDRESS _____		
CITY, STATE, ZIP _____	TELEPHONE _____	
SOCIAL SECURITY # _____	% OF OWNERSHIP _____	
<b>SECRETARY AND/OR MAJORITY OWNER (10% OR &gt; SHAREHOLDER)</b>		
NAME _____		
ADDRESS _____		
CITY, STATE, ZIP _____	TELEPHONE _____	
SOCIAL SECURITY # _____	% OF OWNERSHIP _____	
<b>TREASURER AND/OR MAJORITY OWNER (10% OR &gt; SHAREHOLDER)</b>		
NAME _____		
ADDRESS _____		
CITY, STATE, ZIP _____	TELEPHONE _____	
SOCIAL SECURITY # _____	% OF OWNERSHIP _____	

**SALES INFORMATION**

NORMAL PAYMENT TERMS _____	IF APPLICABLE - DATING TERMS _____	
AVERAGE MONTHLY REVENUES \$ _____,000.00	ANNUAL REVENUES (TRAILING 12 MONTHS) \$ _____,000.00	AVERAGE MONTHLY REVENUES (PROJECTED FOR NEXT 12 MONTHS) \$ _____,000.00
NUMBER OF CLIENTS/CONTRACTS BILLED/INVOICED _____	FREQUENCY OF BILLING (DAILY; WEEKLY; MONTHLY) _____	

**INFORMATION ON EXISTING AWARDED CONTRACTS/TASK ORDERS**

CONTRACT INFORMATION (INCLUDE NAME OF GOVERNMENT AGENCY)	YEARS SO FAR	YEARS TO COMPLETION	EXPECTED ANNUAL REVENUES
_____	_____	_____	\$ _____,000.00
_____	_____	_____	\$ _____,000.00
_____	_____	_____	\$ _____,000.00
_____	_____	_____	\$ _____,000.00
_____	_____	_____	\$ _____,000.00
_____	_____	_____	\$ _____,000.00
_____	_____	_____	\$ _____,000.00
_____	_____	_____	\$ _____,000.00
_____	_____	_____	\$ _____,000.00
_____	_____	_____	\$ _____,000.00
_____	_____	_____	\$ _____,000.00
_____	_____	_____	\$ _____,000.00



**BACKLOG INFORMATION**

GENERAL CONTRACT INFORMATION (SUCH AS "AN IT CONTRACT") (INCLUDE NAME OF GOVERNMENT AGENCY)	EXPECTED TERM	PRIME OR SUB	EXPECTED ANNUAL REVENUES
_____	_____	_____	\$ _____,000.00
_____	_____	_____	\$ _____,000.00
_____	_____	_____	\$ _____,000.00
_____	_____	_____	\$ _____,000.00
_____	_____	_____	\$ _____,000.00
_____	_____	_____	\$ _____,000.00
_____	_____	_____	\$ _____,000.00
_____	_____	_____	\$ _____,000.00
_____	_____	_____	\$ _____,000.00

**BANKING RELATIONSHIP**

BANK NAME _____		
ADDRESS _____		
TELEPHONE _____	CONTACT _____	ACCOUNT # _____
DOES THE BANK HAVE A SECURITY INTEREST IN THE CONTRACTS, ACCOUNTS RECEIVABLE OR INVENTORY OF THE COMPANY?		<input type="checkbox"/> Yes <input type="checkbox"/> No
DOES ANY OTHER PARTY HAVE A SECURITY INTEREST IN THE CONTRACTS, ACCOUNTS RECEIVABLE OR INVENTORY OF THE COMPANY?		<input type="checkbox"/> Yes <input type="checkbox"/> No

**SECURED PARTY**

NAME _____
FULL ADDRESS _____
PURPOSE OF INDEBTEDNESS AND DESCRIPTION OF ASSETS HELD AS SECURITY _____

<p><b>THE FOLLOWING DOCUMENTS ARE REQUIRED TO ALLOW WINCREEK FINANCIAL TO DETERMINE ITS ABILITY TO PROVIDE FINANCING TO THE APPLICANT:</b></p> <ol style="list-style-type: none"> <li>1. COMPLETED APPLICATION</li> <li>2. THE LAST TWO FISCAL YEARS AS WELL AS THE CURRENT YEAR TO DATE INTERIM PERIOD COMPANY FINANCIAL STATEMENTS, INCLUDING BALANCE SHEET AND INCOME STATEMENT.</li> <li>3. PERSONAL FINANCIAL STATEMENT OF COMPANY OWNERS COMPLETED ON A WINCREEK FINANCIAL STATEMENT FORM.</li> <li>4. CERTIFICATE OF GOOD STANDING.</li> <li>5. ARTICLES OF INCORPORATION OR ARTICLES OF ORGANIZATION AND OPERATING AGREEMENT.</li> </ol>	<ol style="list-style-type: none"> <li>6. COMPANY BY-LAWS</li> <li>7. D/B/A FILING (IF APPLICABLE).</li> <li>8. CUSTOMER LISTING INCLUDING NAME, ADDRESS, AND PHONE NUMBER.</li> <li>9. CURRENT ACCOUNTS RECEIVABLE AGING (DETAILED).</li> <li>10. APPLICABLE SAMPLE INVOICE COPIES.</li> <li>11. PHOTOCOPY OF THE CUSTOMER'S DRIVERS LICENSE IF FINANCING IS FOR AN INDIVIDUAL VERSUS A BUSINESS.</li> <li>12. COPIES OF APPLICABLE CONTRACTS AS WELL AS ALL MODIFICATIONS AND/OR AMENDMENTS ASSOCIATED WITH SUCH CONTRACTS.</li> </ol>
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IF YOUR APPLICATION FOR CREDIT IS DENIED, YOU HAVE THE RIGHT TO A STATEMENT OF SPECIFIC REASONS FOR DENIAL. TO OBTAIN THE STATEMENT, PLEASE CONTACT **WINCREEK FINANCIAL LLC**, AT 1340 OLD CHAIN BRIDGE ROAD, SUITE 200, MCLEAN, VIRGINIA 22101 WITHIN 60 DAYS FROM THE DATE YOU ARE NOTIFIED OF OUR DECISION. WE WILL PROVIDE YOU WITH THE STATEMENT OF REASONS WITHIN 30 DAYS OF RECEIVING YOUR REQUEST. IF WE PROVIDE YOU WITH THE STATEMENT ORALLY, YOU HAVE THE RIGHT TO HAVE THE REASONS CONFIRMED IN WRITING. WE WILL SEND YOU A WRITTEN CONFIRMATION OF REASONS FOR THE DENIAL WITHIN 30 DAYS OF RECEIVING YOUR WRITTEN REQUEST FOR CONFIRMATION.

THE FEDERAL EQUAL CREDIT OPPORTUNITY ACT PROHIBITS CREDITORS FROM DISCRIMINATING AGAINST CREDIT APPLICANTS ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, MARITAL STATUS, AGE (PROVIDED THE APPLICANT HAS THE CAPACITY TO ENTER INTO BINDING CONTRACT), BECAUSE ALL OR PART OF THE APPLICANT'S INCOME DERIVES FROM ANY PUBLIC ASSISTANCE PROGRAM, OR BECAUSE THE APPLICANT HAS IN GOOD FAITH EXERCISED ANY RIGHT UNDER THE CONSUMER CREDIT PROTECTION ACT. THE FEDERAL AGENCY THAT ADMINISTERS COMPLIANCE WITH THIS LAW CONCERNING THIS CREDITOR IS: OCC-CUSTOMER ASSISTANCE UNIT, 1301 MCKINNEY AVENUE, SUITE 3710, HOUSTON, TX 77010.

THE ABOVE INFORMATION AND DOCUMENTATION WILL BE HELD IN STRICT CONFIDENCE AND WILL BE RETAINED BY WINCREEK FINANCIAL LLC AND ITS LENDER PARTNERS, IF AN ACCOUNTS RECEIVABLE FINANCING RELATIONSHIP IS ESTABLISHED.

THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT AND I HEREBY AUTHORIZE ANY CREDIT INVESTIGATION NECESSARY BY WINCREEK FINANCIAL LLC AND ITS ASSIGNS. I AUTHORIZE WINCREEK FINANCIAL LLC AND ITS ASSIGNS TO FILE A FINANCING STATEMENT REFLECTING THE SECURITY INTEREST IN THE ACCOUNTS PURCHASE AGREEMENT WHILE THE APPLICATION IS BEING PROCESSED. IN THE EVENT THE APPLICATION IS DENIED, THE FINANCING STATEMENT WILL BE TERMINATED.

PRINT NAME _____	TITLE _____	DATE _____
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