



CREDIT APPLICATION

Date Application Received / /

COMPANY INFORMATION

LESSEE NAME: _____

VENDOR NAME: MGF Services, LLC

ADDRESS: _____

ADDRESS: 1288 Summit Avenue, Suite 107 - PMB# 224

CITY: _____ STATE/ZIP: _____

CITY: Oconomowoc STATE/ZIP: WI 53066

LESSEE CONTACT NAME: _____

VENDOR CONTACT NAME: Mona Friedl

PHONE: _____ E-MAIL: _____

PHONE: 800-369-4458 E-MAIL: mfriedl@mgf-services.com

(CHECK ONE) CORPORATION PARTNERSHIP PROPRIETORSHIP LLC LLP LESSEE WEBSITE: _____

NATURE OF BUSINESS		STATE ORGANIZATION ID #	FEDERAL ID #	STATE OF INCORPORATION	STATE ESTABLISHED	YEARS IN BUSINESS (PRESENT OWNERSHIP)
QUANTITY	EQUIPMENT DESCRIPTION (MANUFACTURER, YEAR MAKE & MODEL - Attach separate sheet if necessary)					
EQUIPMENT COST		EXCLUDING TAX:		TOTAL AMOUNT FINANCED		EXCLUDING TAX
EQUIPMENT LOCATION IF DIFFERENT THAN ABOVE ADDRESS OF APPLICANT:					EQUIPMENT DELIVERY DATE:	
TERM OF LEASE NUMBER OF MONTHS		PAYMENTS DUE		AMOUNT OF EACH RENT PAYMENT		TOTAL INITIAL PAYMENT
<input type="checkbox"/> 24 <input type="checkbox"/> 36 <input type="checkbox"/> 48		<input type="checkbox"/> MONTHLY		\$		\$
<input type="checkbox"/> 60 <input type="checkbox"/> 72 <input type="checkbox"/> 84		<input type="checkbox"/> QUARTERLY		PLUS APPLICABLE TAX		PLUS APPLICABLE TAX
		<input type="checkbox"/> ANNUALLY				(OTHER) _____
BUSINESS BANK NAME:		CONTACT NAME:		CONTACT PHONE:		CONTACT E-MAIL:
FINANCE COMPANY NAME:		CONTACT NAME:		CONTACT PHONE:		CONTACT E-MAIL:
OWNERS, PARTNERS AND GUARANTORS INFORMATION (Attach separate sheet if necessary)						
1. NAME (PERSONAL GUARANTOR/PRINCIPAL/PARTNER/OFFICER):			TITLE	PERCENT OWNED	DATE OF BIRTH	SSN
HOME ADDRESS: (CITY, STATE, ZIP)			HOME PHONE			
2. NAME (PERSONAL GUARANTOR/PRINCIPAL/PARTNER/OFFICER):			TITLE	PERCENT OWNED	DATE OF BIRTH	SSN
HOME ADDRESS: (CITY, STATE, ZIP)			HOME PHONE			

By submitting this Application, the undersigned warrants that the applicant and each individual listed as a principal, partner, owner, guarantor or obligor consent, authorize and warrant as follows: (a) Canvass Capital, LLC and its agents/assigns ("CC") may obtain commercial and consumer credit reports, investigate references and statements, and make other credit inquiries about the applicant and all such individuals, and anybody contacted in connection therewith may release any credit and financial information; (b) CC and its agents/assigns may share with one another financial, credit and other information about the applicant and such individuals and use shared information to market to the applicant and the individuals; (c) the information on or accompanying this Application is true and complete, and the undersigned will notify CC of any material change in any information; (d) this Application is submitted in connection with financing solely for business and commercial purposes and NOT for personal, family or household purposes; (e) the applicant, if an individual, is a citizen or lawful permanent resident of the United States; and (f) this Application will apply to any future request for additional financing and all notices, disclosures, consents and warranties shall be deemed repeated for each future request, unless the applicant submits a new written application. CC does not make offers or commitments to extend credit except in final signed documents and, in limited circumstances, in and pursuant to the terms and conditions of written commitment letters. Term sheets, proposal letters, approval letters and the like are not commitment letters.

READ CAREFULLY BEFORE SUBMITTING THIS APPLICATION: We recommend that you print the Application, sign it below and e-mail or mail it to us at the address set forth below. If you send this Application by unencrypted and non-secure e-mail, the contents including non-public information may be at risk, and we are not responsible for the security of the contents or for any theft or loss of data during e-mail transmission. If you decide to assume the risk of submitting this Application by e-mail, enter your name as authorized agent below. By entering your name and submitting this Application to us, you agree that this Application is an electronic record executed by you using your electronic signature.

Signature/Title:	Date:
Signature/Title:	Date:

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT. To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

EQUAL CREDIT OPPORTUNITY ACT. If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact our Customer Service Manager, 403 College Crossing, Suite 100, Rolling Meadows, IL 60008 (847-847-7573) within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement. **NOTICE:** 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 a 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 the Bureau of Consumer Financial Protection, 1700 G Street NW., Washington DC 20006. (Please retain a copy of this notice and application for your records, updated 6/15)