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COMPANY INFORI	MATION								
					ne (if different)				
Address					Vendor Information				
Addiess					vendor information				
City Stat		State	ate Zip						
					Amount		Ne	New or Used	
Contact Person Telephone			Fax		1				
					Equipment Description				
					Equipment Description				
Nature of Business EIN			Years in Business						
Location of Equipment (if different than above)					Email Ad	ldress			
,									
DEDCOMAL INFOR	MATION FOR		/NEDC O	EEICEDO	AND CI		`		
PERSONAL INFORMATION FOR ALL OWNERS Name Title				FFICERS				% Ownership	
Name			Title		Social Security Number			76 Ownership	
Street Address			City		State Zip		Cell/Hom	Cell/Home Phone	
Name		Tit	Title		Social Security Number			% Ownership	
Street Address		Cit	City		State	Zip	Cell/Home	e Phone	
Street Address		Oil	City		Otato	State Lip Goll/Home Friend			
			T					1	
Name		Tit	Title		Social Security Number			% Ownership	
Street Address		Cit	City		State Zip		Cell/Home	Cell/Home Phone	
Name		Tit	Title		Social Security Number			% Ownership	
Street Address		Cit	City		State Zip		Coll/Hom	Cell/Home Phone	
Street Address		Cit	City		State Zip		Cell/Homi	Cell/Horrie Friorie	
Credit Authorization: I/We I	hereby authorize Ar	cher Busines	s Capital II (	C its designe	ee assigns o	or potential assign	s to review his	s/her personal credit	
profile provided by national	I credit bureaus in o	considering th	nis application	and for the p	ourpose of u	pdating, renewing	, extending ad	ditional credit or the	
collection of any late accou submitted herein is true, cor									
						ĺ	Data		
Signature(s) of all owners, officers and/or guarantors							Date		
X									
Signature(s) of all owners, officers and/or guarantors							Date		
X									
Signature(s) of all owners, officers and/or guarantors						Date			
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Signature(s) of all owners, officers and/or guarantors							Date		
	o. gaarante	•				24.0			
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