

TAMCO Capital LLC
PROSPECTIVE FACTORING CLIENT
Mini-Application

Date: _____

Name of Company: _____

Address: _____

Contact Name: _____

Contact Phone Number (____) _____ - _____

Contact Email Address: _____

Nature of Business: _____

Sale of Goods

Provider of Service

Is sale pursuant to a Term Contract or a Purchase Order ?

Number of Customers: _____

Annual Revenues: _____

Current Debt: _____

Liens on Receivables (check if YES)

Gross Margin %: _____

Terms of Sale: 30 days 60 days Other _____

Accounts Receivable Aging Attached (required)

Additional information