

We Fund Capital LLC
Please Return Completed and Signed with 4 months most recent
Business Banking and Processing Statements.
Office Line: 212-303-7690
Fax Line: 347-273-1111
Email: Submissions@wefundllc.com



BusinessDBA:	BusinessLegalName:
FederalTaxID:	BusinessStartDate:
BusinessAddress:	State: ZipCode:
City:	BusinessPhone:
EmailAddress:	CellPhone:
Website:	Fax#:
BusinessType: Corp Sole Prop LLC Partnership	FICO Score
Product/ServiceSold:	SeasonalBusiness:YES/NO
PeakSalesMonths:	Franchise:YES/NO
MonthlyAverageVISA/MASTERCARDsales:	MonthlyAverageSales:
LandlordContact:	Property:LEASE/OWN
Phone: Rent:	TermofLease:
DesiredCashAdvance:	ReasonforAdvance:
Doyouhaveacashadvancenow? YES/NOFunder:	DateofAdvance:
FundedAmount:\$ Payback:\$	Balance:\$ DailyHB%:

Owner / Principal Information (1)	Owner / Principal Information (2)
Name:	Name:
Address:	Address:
City,StateZip:	City,StateZip:
Phone:	Phone:
%ofOwnership:	%ofOwnership:
DateofBirth:	DateofBirth:
SS#:	SS#:
Driver'sLicense#:	Driver'sLicense#:

References	
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TradeReference1Name:	Phone:
TradeReference2Name:	Phone:

By signing below each of the above listed business and business owner/officer (individually and collectively, "you") authorize We Fund Capital LLC and each of its representatives, successors, assigns and designees ("Recipients") that may be involved with or acquire commercial loans having daily repayment features or purchases of future receivables including Merchant Cash Advance transactions, including without limitation the application therefor (collectively, "Transactions") to obtain consumer and/or personal, business and investigative reports and other information about you, including credit card processor statements and bank statements, from one or more consumer reporting agencies, such as Trans Union, Experian, Equifax, and from other credit bureaus, banks, creditors and other third parties. You also authorize We Fund Capital LLC to transmit this application form, with any of the foregoing information obtained in connection with this application, to any or all of the Recipients for the foregoing purposes. You also consent to the release, by any creditor or financial institution, of any information relating to any of you, to We Fund Capital LLC and to each of the Recipients, on its own behalf. I am providing my business cell phone and business e-mail address and hereby consent to the receipt of correspondence/messages regarding transactions with We Fund Capital LLC and/or its affiliates on either medium.

Owner Signature (1) :	Date Signed:
Owner Signature (2) :	Date Signed: