



Thank you for your interest in West Clara Funding LLC. Attached, you will find the application for funding. Please complete the application in its entirety and return it along with:

- * **4 Months Bank Statements (all pages)**
- * **4 Months Credit Card Processing Statements (all pages)**

In order to ultimately fund you, we also need the following documents from you. Please send it along with your application:

- * **Copy of your Lease or Deed (if applicable, all pages with terms and signature)**
- * **Driver's License**
- * **Void Check**
- * **Business Certificate**

Once we receive your completed and signed application, along with the aforementioned documentation we will contact you with the specific information, how much money you qualify for and when we can ACH these funds into your account.

Sincerely,

West Clara Funding LLC.

Phone: (866) 986-3586

Fax: (213) 986-3336

E-mail: westclarafunding@gmail.com

Phone: (866) 986-3586
 Fax: (213) 986-3336



E-mail: info@westclarafunding.com

Business Information

Please fill in the spaces below and e-mail or fax us the application. By doing so, you are giving **West Clara Funding, LLC.** as well as agents and affiliates, permission to review your business and personal credit history in order to provide you with formal funding approval.

Business Legal Name:	DBA Name:
Address:	Suite/Floor:
City:	State:
Zip Code:	Phone:
Mobile:	Fax:
Website:	E-mail:
Legal Entity:	Type of Business:
Federal State Tax ID#:	Product Sold:
Business Start Date:	Lanlord/Mortgage Company:
Merchant Account:	Lanlord Contact Name:
Terminal Type:	Lanlord Contact Phone:

Owner/Principal Information

Name:	Date of Birth:
Address:	City:
State:	Zip:
Phone:	Fax:
E-mail:	Mobile:
% of Ownership:	SSN#:

Funding Information	Trade References
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Average Visa/MC Monthly Sales:	1. Name:
Average Monthly Sales:	Contact:
Average Ticket Size:	Phone:
Advance Company:	2. Name:
Date of Advance:	Contact:
Advance Amount:	Phone:
Payback Amount:	3. Name:
Balance Owed:	Contact:
Holdback%:	Phone:

By signing below, the Merchant and its owners/principals: (1) certify that all information and documents submitted in connection with this Application is true, correct and complete; and (2) authorize West Clara Funding LLC., its agents, partners, representatives, successors, assigns, designees, agents, affiliates, lenders and recipients to receive credit reports and any other information regarding the Merchant and its owners and principals from third parties, to verify any information provided on the Application. By signing this agreement, the Merchant hereby authorizes West Clara Funding LLC. and its affiliates to obtain the 12 most recent monthly reports detailing Merchant's credit card processing and banking activity from its credit card processor or any agent or other third party utilized by that processor to authorize, clear and/or settle credit card payments. Merchant also authorizes West Clara Funding LLC, to transmit this Application, along with any the foregoing information obtained in connection with this Application, to any or all of the recipients for the foregoing purposes.

Signature: X _____ **Date:** _____ **Fax to: (213) 986-3336**