



TO: ACC CAPITAL CORPORATION

FROM: _____ DATE: _____

PHONE: _____

ACC Capital Corporation
1787 E. Fort Union Blvd, Suite 200
Salt Lake City, UT 84121
Phone: 1-800-409-5008
Fax: 801-733-2274
Website: www.ACCCAPITAL.COM

BROKER PROFILE

COMPANY NAME: _____

ADDRESS: _____ CITY/ZIP _____

PHONE: _____ FAX: _____

OWNER/PRES: _____ CONTACT NAME: _____

TAX ID #: _____ GEOGRAPHIC MKT: _____

We have _____ salespeople and have _____ total employees.

We specialize in the following equipment:

Equipment Type:

_____ is _____ % of our annual volume.

_____ is _____ % of our annual volume.

_____ is _____ % of our annual volume.

_____ is _____ % of our annual volume.

The average equipment cost we originate is \$ _____

Generally, the range of equipment cost we originate is between \$ _____ and \$ _____.

Last year we originated \$ _____ (equipment cost) in _____ transactions. Of this _____ % was held in our own portfolio.

The following is a complete list of funding sources we have used in the last two years:

NAME AND ADDRESS

1.) _____

CONTACT: _____
PHONE: _____
RELATIONSHIP SINCE: _____
VOLUME FINANCED: _____

2.) _____ CONTACT: _____

PHONE: _____
RELATIONSHIP SINCE: _____
VOLUME FINANCED: _____

3.) _____ CONTACT: _____

PHONE: _____
RELATIONSHIP SINCE: _____
VOLUME FINANCED: _____

4.) _____ CONTACT: _____

PHONE: _____
RELATIONSHIP SINCE: _____
VOLUME FINANCED: _____

The following is the main bank for the company:

BANK NAME AND ADDRESS

PHONE: _____
ACCT #: _____

The officer who is most familiar with our relationship is _____ and can be reached at this phone number, _____.

The following is a list of credit references:

NAME AND ADDRESS

1.) _____ CONTACT: _____

PHONE: _____

2.) _____ CONTACT: _____

PHONE: _____

3.) _____ CONTACT: _____

PHONE: _____

The following is a list of all persons who have a financial interest in the firm.

NAME AND ADDRESS

1.)	_____	PHONE #: _____
	_____	SOCIAL SECURITY #: _____
	_____	% OWNER: _____

2.)	_____	PHONE #: _____
	_____	SOCIAL SECURITY #: _____
	_____	% OWNER: _____

3.)	_____	PHONE #: _____
	_____	SOCIAL SECURITY #: _____
	_____	% OWNER: _____

(attach an extra sheet if necessary)

We have attached copies of our last two year-end financial statements and other information, which helps explain our business including the work history of the principals.

I (we) grant permission to ACC to verify all information in this statement and to provide any information requested by my (our) other creditors and/or funding sources. I also grant ACC permission to obtain a credit report on me in connection with this relationship for all legitimate purposes. Such purposes include assisting in making a decision to provide funding and reviewing our relationship. I (we) also grant permission to those creditors and/or funding sources to provide all information requested by ACC.

Name

Date