

Dear Customers,

*** To be distributed by client of Hana Financial, Inc.

We factor our sales through **Hana Financial, Inc.** In order to provide you with credit approvals for a term sales, our factor may need certain information on your company. Please take a moment to fill out this Customer Account Information Sheet or provide us with your own reference sheet along with your purchase order.

If you have any questions, please feel free to contact Hana Financial, Inc. Tel: (213) 240-1234 / Fax: (213) 228-3377

We sincerely thank you for your patronage.

CUSTOMER ACCOUNT INFORMATION

COMPANY NAME (COMPLETE LEGAL NAME)		TRADE NAME, IF DIFFERENT FROM LEGAL NAME	
ADDRESS: (STREET)		(CITY)	(STATE) (ZIP)
PHONE NUMBER	FAX NUMBER	FEDERAL TAX ID NO.	DUNS NO.
BUSINESS ENTITY CORP. () PARTNERSHIP () PROPRIETORSHIP () LLC ()		EST. YEAR & STATE	
PRINCIPAL - NAME	DATE OF BIRTH	PLACE OF BIRTH	SOCIAL SECURITY NUMBER
TITLE	OWNERSHIP (%) %	DRIVER'S LICENSE NO & STATE	HOME PHONE NUMBER
HOME ADDRESS (STREET)		(CITY)	(STATE) (ZIP)
BANK NAME FOR BUSINESS ACCT.	ACCOUNT NO.	PHONE NUMBER	CONTACT PERSON
BANK ADDRESS (STREET)		(CITY)	(STATE) (ZIP)
ADDITIONAL BANK, IF ANY	ACCOUNT NO.	PHONE NUMBER	CONTACT PERSON
BANK ADDRESS (STREET)		(CITY)	(STATE) (ZIP)
CPA FIRM NAME		PHONE NUMBER	CONTACT PERSON
CPA ADDRESS (STREET)		(CITY)	(STATE) (ZIP)
SUPPLIER (1) - NAME	ADDRESS		
PHONE NUMBER	FAX NUMBER	CONTACT (NAME / TITLE)	
SUPPLIER (2) - NAME	ADDRESS		
PHONE NUMBER	FAX NUMBER	CONTACT (NAME / TITLE)	
SUPPLIER (3) - NAME	ADDRESS		
PHONE NUMBER	FAX NUMBER	CONTACT (NAME / TITLE)	

CREDIT RELEASE AUTHORIZATION: I hereby authorize Hana Financial, Inc. to verify any credit information from whatever source it deems appropriate and I further authorize our banks, trade references and financial institutions the right to release by telephone or fax. All credit information obtained will be treated confidentially and will be used only in assisting Hana Financial, Inc. in issuing credit approvals. A copy or fax of this Credit Release Authorization may be deemed to be equivalent of the original.

Signature:

Name:

Title:

Date:
