

Principal's Name _____

EXACT Legal Name of Borrower/Lessee ("Obligor"): _____

Business Structure: Proprietorship Partnership S-Corporation C-Corporation Other _____

Home Address: _____

STREET CITY STATE ZIP

Home Telephone Number: _____ Home Fax Number: _____

Business Address – Equipment Location: _____

STREET CITY STATE ZIP

Business Telephone Number: _____ Business Fax Number: _____

Cell Phone Number: _____ E-Mail Address: _____

Social Security Number: _____ Birthdate (mm/dd/yy): _____

ADA/AAHA Member No.: _____ How Long Have You Been Practicing (Years): _____

Degree: _____ License Number: _____

Company TIN/EIN: _____ Company Revenue Last Year \$ _____

Are you a U.S. Citizen? YES NO If "NO," are you a U.S. Permanent Resident? YES NO

Who referred you to Group Financial? _____

Have you ever applied for credit under another name? YES NO If yes, what name? _____

FINANCING REQUEST

Equipment	\$ _____	Leasehold Improvements	\$ _____
Working Capital	\$ _____	Business Loan Refinance	\$ _____
Other	\$ _____	Practice Acquisition	\$ _____

TOTAL FINANCING REQUEST \$ _____

Co-Applicants or Guarantors should each complete and sign a separate application.

If this application is connected to another application, the name on that application is _____

and I am applying as a: Guarantor Co-Applicant (I understand I will be an additional Obligor.)

The undersigned, as principal and/or guarantor of the Obligor, and on behalf of the Obligor (individually and collectively "Applicant"), hereby affirms that the foregoing information contained in this Credit Application is presented for the purpose of obtaining or maintaining credit as of the date indicated and is true, complete and correct. Applicant understands Group Financial Services, is relying on the accompanying and future provided statement of financial condition in extending or continuing to extend credit to Applicant. Applicant agrees to inform Group Financial Services immediately of any matter that will cause any material change in Applicant's financial condition. Group Financial Services, its successors or assigns is/are authorized to make any investigation of Applicant's credit either directly or through any agency employed by Group Financial Services for that purpose. Group Financial Services may disclose to any other interested parties Group Financial Services' experience with this account. Applicant understands that Group Financial Services will retain this application whether or not credit is granted. Group Financial Services may share this application or information contained in or related to it with affiliates of Group Financial Services to determine Applicant's eligibility for other products or services offered by Group Financial Service's affiliates, unless you write to Group Financial Services, at 70 Arrow Road, Suite #5, Hilton Head Island, SC 29928 to advise that you do not want this information shared. NOTICE: Group Financial Services complies with Section 326 of the USA PATRIOT Act. This law mandates that we verify certain information about you while processing your application. **You understand that you may apply for credit in your name alone, regardless of your marital status.** The federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (with certain exceptions); because all or part of the applicants income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with the law concerning this creditor is Office of Thrift supervision, Regional Director, Midwest Region, P.O. Box 619027, Dallas/Fort Worth, TX 75261-8027

AAHA and ADA will have no involvement in either the credit approval process or the terms of the Finance Agreement.

Signed _____

Date _____

Print Name _____

Title _____