

USBF Referral Agent Registration

Please Print Legibly

Starting Date: ____/____/____

Agent Name: _____

Mailing Address: _____

City, State, Zip: _____

Home Phone: _____ Cell Phone _____

Fax Number: _____ Work Number _____

Email address _____

S.S.N. ____-____-____ EIN ____-____-____

Have you previously sold bankcard-processing services? Yes No

If YES, what was the company name you sold for? _____

Dates working with the above: From: _____ To: _____

Previous company address: _____

Previous company phone: _____

If you have not previously sold bankcard processing, please complete the following previous work information.

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Type of Business: _____

Title: _____ Date Employed: From _____ To _____

To induce US Business Finance Corp. known as "USBF" here after, I certify that by signing below, the accuracy of all the foregoing information and authorize USBF, credit bureaus, or other agencies employed by USBF to investigate / verify all references provided herein and all statements or other data obtained from me or from other persons pertaining to my work experience, credit or financial responsibility.

By signing below, I certify that I may not represent to any party or business entity products of USBF, using any business name other than the "Agent Name" listed at the top of this form, and by performing the necessary business duties to fairly represent USBF and any third party vendor product or services available to the Agent, and that I am personally certifying that I will provide a "best efforts" attitude and approach to share our product and services to potential business clients.

Agent Signature

Date

US Business Finance Corp.

Date