

BUSINESS INFORMATION

Business Legal Name *

Danielles Home Care

Business DBA *

Danielle L Barrett

Business FEIN *

882497957

Business Start Date *

08/2006

Business Type *

Sole Proprietor

Nature of Business/Industry Type *

Home health care

Business Phone Number *

2196887115

Street Address *

3083 Angelina St

Address Line 2 *

City *

Portage

State *

IN

Zip Code *

46368

FINANCIAL INFORMATION

Annual Business Revenue *

138000

Average Business Bank Account Balance *

11500

Do you have an existing business loan or merchant cash advance? *

Yes

No

balance on existing loan *

name of lender? *

OWNER INFORMATION

First Name *

Danielle

Last Name *

Danielle

Social Security Number *

329720882

Date of Birth *

06/19/1969

Email Address *

dbarrett5@msn.com

Cell Phone Number *

2196887115

Home Phone Number *

2196887115

Business Ownership % *

100

Street Address *

3083 Angelina St

City *

Portage

State *

IN

Zip Code *

46368

FUNDING REQUESTED

Desired Financing Amount *

8000

Purpose of Financing *

Working Capital

How Did You Hear About Us? *

Internet search

Name of Rep You Are or Have Previously Worked With (if Any)

By signing & faxing or emailing us your application, you certify that

- you are authorized to apply on behalf of the company whose full legal name appears above under the Company Information portion of the Loan Application for a business loan from us and
- all information you provide within the Loan Application and other supporting documents is true and complete and that you will notify us of material changes to such information.

You understand & agree that we and our agents and assignees are authorized to contact 3rd parties to make inquires in evaluating your Loan Application (including requesting business & personal credit bureau reports from credit reporting agencies and other sources) or for any update, renewal, extension of

credit bureau name and address.

You understand and agree that we may provide credit & other information from the Loan Application and on the signing individual(s) & the company with 3rd parties who may use the information any lawful purpose, including for the purpose of offering credit and/or other products & services to the signing individual(s) and/or the company.

To help the government fight the funding of terrorism and money laundering activities, Federal law requires us to obtain, verify, and record information that identifies each person who cashes checks, wire funds or engages in other financial services with PWC.

We will ask for your name, address and other information that will allow us to identify you. We may also ask to see your driver's license. Certain transactions in California may fall under CA Lender/Broker License requirements. Please check with your representative for eligibility.

Agree

Samuel Barrett

Date

08/30/22