Date: 03/12/24

GLOBAL
S M E LOANS INCORPORATED

Source:	completely	filled-out loan a	pplication form • Loan S	& documentary require Specialist	ements. lemarketer			Specialist: Ia	n Fhabi L	ofranco.	
								emarketer: pose of Loan: Car Purchase			
21							•	cose of Loan: Car Purchase ired Loan Amount: 500,000.00			
If with Collateral; type of vehicle:								Desired Term: 36 months			
Collateral Detail											
Make/Model:											
Year Model: BORROWER'S	e dede	ONAL INFOR	MATION (MA	NDATORY)							
			t Name, Middle Na						Sin	ale	
FULL NAM	ИE	Jeffrey Orias	riano, imadio rio					Civil Status	_	○ Married	
DATE OF BII		(MM/DD/YYY) 11/12/1993	Y)			Place of Birth(City City D	/Munici	ipality)			
PRESENT ADD		Owned	d Owned	d/Mortgage 🔘 Livi	ing w/ Relatives	Renting				LENGTH OF STAY	
PROVINCIA ADDRESS		456 Maple Ro	ad							LENGTH OF STAY	
PERMANEI ADDRESS		101 Elm Aven	ue, Brgy X City	X Province X				LENGTH OF STAY			
CONTACT DE	TAILS	MOBILE NUMBER EMAIL ADDRESS FACEBOOK/VIBER 777-666-5555 jeffreyorias@gmail.com jeffrey.Orias									
NATIONALI	ITY	● Filipino			PLEASE SPEROIDEN	jeffrey.Orias					
		· ·	Ollieis		 _		_				
TIN / SSS / GS		TIN #:		SSS #:	GS	SIS #:					
HIGHEST EDUC		_ ATTAINMENT:	_	_				F FUNDS:	_		
	○ High School ○ Gr		○ Gra	_	Post Graduate		 Salary/Profession 			Remittance	
O Undergrad	uate		Bac Bac	helor's Degree		() E	Busine	SS		Salary	
INCOME INFO	ORMATION	ON									
NAME OF EMPI / BUSINES				EMPLOYED YZ Enterprises			SE	ELF EMPLOYED/	BUSINESS		
OFFICE/BUSII ADDRESS			303 P	Pine Blvd, Suite 400							
NATURE O BUSINESS EMPLOYME	S/		303 P	Pine Blvd, Suite 400							
CONTACT IN	NFO.		303 P	Pine Blvd, Suite 400	ne Blvd, Suite 400						
DESIGNATION POSITION			303 P	ine Blvd, Suite 400							
CHARACTER	REFER	ENCES (NOT L	VING IN THE SAM	ME HOUSEHOLD)							
Name				Address				Contact Number			
Sophia Wilson								444-555-6666			
	Etha	n Taylor						111-222-3333			
CO DODDOM	/EDIO DE	EDCONIAL INI	ODMATION	(NAANDATODY)							
CO-BORROWER'S PERSONAL INFORMATION (Last Name, First Name, Middle Na Chrislie Alfabete							Civil Status	Sir ○ Ma	_		
DATE OF BII		(MM/DD/YYY) 07/25/1989	Υ)			Place of Birth(City City C	/Munici	ipality)	Wie	arrieu	
PRESENT ADDRESS Owned Owned Same as Permanent Address			d/Mortgage ○ Livi	ing w/ Relatives	Renting				LENGTH OF STAY		
PROVINCIAL 101 Pine Road									LENGTH OF STAY		
PERMANENT ADDRESS 456 Elm Avenue, Brgy X City			X Province X						LENGTH OF STAY		
CONTACT DETAILS MOBILE NUMBER 888-777-6666					EMAIL ADDRESS FACEBOOK/VII chrisliealfabete@gmail.com isabella.martine						
NATIONALITY							ai ui ieZ.	IACEDOUK			
TIN / SSS / GSIS No.		<u></u>									
		TIN #:		SSS #:	GS	SIS #:					
HIGHEST EDUC		_ATTAINMENT:						OF FUNDS:	^	D	
		⊝ Gra ⊚ <u>Ma</u>	raduate		Salary/ProfessionBusiness			RemittanceInvestments			
				ВА	NK ACCOUNT(S)						
BANK	∐ ВІ	RANCH	DATI	E OPENED	ACCOUNT TYPE			ACCOUNT NUMBER			
Bank A		BDO	20)20-12-05	Sav	ings		9876543210			