Name Gus Livas

P.O. Box 2555

Direct # 312-283-0988 Fax 978-451-6648 308 N. Locust St., Suite 100 Grand Island, NE 68801

Email GLivas@amuref.com



Date

www.amuref.com

Application

Signature - Owner / Officer #2

Business Informatio	*(denotes required field	d)			
Anderson, Brown and Le					
Company Name*				d/b/a	
Some Random Street Nan	ne 3/5 S	outh Dakota	New Hamp	oshire	asdf
Address*	City*		State*	County*	Zip*
213-875-1856				03-03-2025	
Phone*	Fax			Date Business Establishe	ed*
				1288188199	
Equipment Location Address	<u> </u>			Federal I.D. #	
Business Structure: O Co	orporation O Partnership	○ Proprietorship ○ LLC			
	· · · · · · · · · · · · · · · · · · ·	7	. 🛕		
Approximate Annual Sales:	\$	Approximate Net Worth	: \$		
Personal Informatio	n				
Jennifer Mora		100			
Owner / Officer #1		% of ow	nership	Title	
Some Random Street Nan	ne 3/5 W	est Kathryn/		New Hampshire	88888
Home Address*	City*			State*	Zip*
213-875-1856				mora@example.net	
Main Phone*	Mobil	e Phone		E-mail Address*	
945-21-5205					
Primary Owner SS#					
Owner / Officer #2		% of ow	nership	Title	
Home Address	City			State	Zip
Main Phone	Mobil	e Phone		E-mail Address	
Additional Owner SS#					
Vendor Information	(Who you are purchasing	g the equipment from)			
<u> </u>					
Vendor	Conta	act		Phone	
Equipment Description		_			
Equipment Cost: \$		Desired Term:	O 36 Month C	0 48 Month O 60 Month	O 72 Month O 84 Month
authorize Amur Equipment Financ	e, Inc., its heirs & assigns to obtain	n a personal report on all principals	& guarantors for cr	edit purposes, & (2) authorizes	the release to Amur Equipment
Finance, Inc. of all credit information					
will review it carefully and get back		• •	•	•	
that statement, please contact us w request for the statement. NOTICE:			•		
sex, marital status, age (provided th					
because the applicant has, in good to Commission, Equal Credit Opportuni	· -	Consumer Credit Protection Act. T	he federal agency th	at administers our compliance v	vith this law is the Federal Trade
	-,, -,	Jennifer N	Mora	U3-	14-2025
Signature - Owner / Officer #1		Title	ioiu		Date
oignature - owner / Officer #1		Title			

Title