



Leasing & Financing by: Investment Leasing Co.

**Medical Specialists
Since 1986**

Bank Authorized
Equipment Leasing & Financing Agents



- * Healthcare
- * High Technology
- * Broadcasting
- * Colleges
- * Industry
- * Municipal/Govt.

About Investment Leasing Company

Who we serve:	Companies of any size and individual professionals
What services we provide:	Leasing and financing financial services
What we finance & lease:	Business and professional equipment, software, and commercial vehicles, new & used
Geographic area we serve:	Continental United States
Types of products offered:	\$1 buyout finance leases & loans, 10% purchase option leases, and FMV leases
Terms:	2-7 year payment terms
Industry Specialties:	Pharmacy, dental, medical, hospital, high tech, broadcasting, colleges, and industry
Dollar ranges:	\$5,000 - \$1,000,000 (most of our customer's capital purchases are from \$30k - \$250k)
Preferred credit profile:	Very good to excellent credit
How our prices compare:	Our 12-lender quotation includes a range of rates and terms from banks and other lenders
Very special unique service:	We work hard to earn 100% repeat business from every customer and have created our industry's first, and unique "Leasing Full Disclosure Checklist©"



Co. founded in San Diego, California in 1986



Corporate office today in San Diego, California



Bruce D. Forinash, Leasing Agent with Co. since 1986 brucef@investmentleasing.com (Phone ext. 101)

PHONE / FAX:	MAILING ADDRESS:	FEDEX / COURIER ADDRESS:	CORPORATE ADDRESS:
800-400-5060 PH	P.O. Box 500110	11835 CARMEL MT. RD.	11440 W. BERNARDO CT.
858-451-0400 PH	SAN DIEGO, CA	SUITE # 1304-351	SUITE # 300
858-451-0033 FAX	92150	SAN DIEGO, CA 92128	SAN DIEGO, CA 92127
Web: www.investmentleasing.com		Calif. Real Estate Broker License #00528469	Calif. Finance Lender/Broker License #603H958

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EQUIPMENT, SOFTWARE, & COMMERCIAL VEHICLE LEASING & FINANCING

PROGRAM HIGHLIGHTS

Geographic Area:	Continental United States		
Products Offered:	Leasing: \$1 Buyout Finance Leases 10% Buyout Option Leases FMV (fair market value) Operating Leases Financing: Equipment Finance Agreements (EFA) Healthcare Industry Small Working Capital Loans (for any business use) Medical Accounts Receivable Financing		
Term:	2-5 years generally (up to 7 years for Operating Leases)		
Equipment Types:	Equipment - Healthcare, Broadcast, virtually any type, especially essential use & money making Software - 100% software program Vehicles - Commercial use such as ambulance, tractors, lab vehicles		
Industry Specialties:	Healthcare Dental Professionals Medical Professionals Medical Professionals Pharmacy & all other healthcare	High Technology / Office Printing / graphin / Copy Broadcasting Production / Manufacturing Food services	Construction Retail Agriculture Transportation / Auto
Lessee Credit Profile:	Quality credits Healthcare Start-ups and selected other start-ups Sole Proprietors, Professional Corporations & LLC, Partnerships, Corporations		
Dollar Amount Ranges:	\$3,000 - \$100,000 Application Only Program (no financial or tax items needed) \$100,000 - \$500,000 Middle Market Program \$500,000 - Unlimited Major Market Program		
Target Profile:	*\$25,000 - \$100,000+ *Healthcare Professionals, Broadcasting Industry *Quality Credits		
Rates & Plans:	Fixed, step-up, custom. Some plans can be structured at or below those of a prime rate bank loan Our 12-lender quotation enables the customer to compare and select and earn the best market rate		
Vendor Programs:	#1 Refer-A-Lease Program - Call us with borrower name & number and we do a-z #2 Share-A-Lease Program - You get credit application & sign customer #3 Private Label Lease Program - Used in conjunction with #3 w/o our name on papers		

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8 REASONS TO FINANCE EQUIPMENT

- I. FINANCE 100%**
Arrange 100% financing of your equipment, software and services with 0% down payment
- II. KEEP UP-TO-DATE**
Keep up-to-date with technology by acquiring more and better equipment than you could without financing.
- III. ACCELERATE ROI**
Rather than paying one lump sum for your equipment, make smaller payments while the equipment generates revenue
- IV. BENEFIT FROM BUNDLING**
Bundle the equipment, installation, maintenance and more into a single, easy-to-manage solution
- V. SAVE CASH**
Save your limited cash for other areas of your business, such as expansion, improvements, marketing or R&D
- VI. OUTSORUCE ASSET MANAGEMENT**
Let your equipment financing company manage your equipment from delivery to disposal
- VII. CUSTOMIZE YOUR TERMS**
Set customized payments to match your cash flow and even seasonal income fluctutations
- VIII. HEDGE AGAINST INFLATION**
Lock in rates when you sign your lease/purchase financing to avoid inflation in the future

Please call or email me for further information or a quotation

Bruce D. Forinash

Bruce D. Forinash
Manager
800-400-5060 ext. 101 (Office)
858-735-5271 (Cell)
brucef@investmentleasing.com

Leases and loans will be arranged or made pursuant to California Department of Business Oversight Finance Lender Law License #603H958

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15 OF THE BEST REASONS FOR A CUSTOMER TO USE INVESTMENT LEASING COMPANY



1. **LOW RATES:** Our multi-lender quotations include rates from 12+ low cost banks & other lenders
2. **SAVE YOU TIME:** We shop for the best rates for you and disclose a range of rates up front
3. **EXCELLENT SERVICE:** Fast approvals and fundings
4. **PRE-APPROVALS:** So that you can shop for your new items with confidence
5. **RELIABILITY & REFERENCES:** Highly regulated banks & large vendor dealers have come to trust us
6. **EXPERIENCE & LONGEVITY:** 22 years in business under the same ownership
7. **SIMPLE & EASY PROCESS:** We take care of all the complexities for you
8. **CONVENIENCE:** You can phone, fax, or email in the brief details we need to approve your co.
9. **FLEXIBLE PROGRAMS:** Payments up to 72 months, step up payment schedules, residual choices
10. **HIGH APPROVAL RATIO:** Due to having many lenders and 22 years of experience
11. **AUTOMATED FROM A-Z:** State-of-the-art systems since 1987 adds to your positive experience
12. **COMMUNICATION IS EASY:** Fast, and convenient with one main contact person to work with
13. **A RELATIONSHIP:** Repeat business is our goal, some customers have 5, 10, 15, even 45+ leases!
14. **FULL DISCLOSURE:** We originated the first leasing industry 42-point disclosure checklist
15. **PROFESSION & INDUSTRY SPECIALIZATION:** Our knowledgeable staff helps you in every step!

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TOOL #1



NET INCOME FROM
NEW EQUIPMENT
CALCULATOR
OPEN TOOL #1

TOOL #2



RETURN ON INVESTMENT
FROM
NEW EQUIPMENT
CALCULATOR
OPEN TOOL #2

TOOL #3



OPPORTUNITY COST
OF NOT ACQUIRING
NEW EQUIPMENT
CALCULATOR
OPEN TOOL #3

TOOL #4



PAYING CASH
FOR NEW EQUIPMENT
WITH AFTER TAX DOLLARS
CALCULATOR
OPEN TOOL #4

TOOL #5



USING PRE-TAX DOLLARS
TO ACQUIRE NEW EQUIPMENT:
LEASING & FINANCING
CALCULATOR
OPEN TOOL #5

TOOL #6



CASH FLOW ANALYZER
CASH VS. LEASE OR LOAN
CALCULATOR
OPEN TOOL #6

TOOL #7



COMPARING
FINANCING & LEASING TYPES:
\$1, 10%, & FMV
LEASES & A LOAN
CALCULATOR
OPEN TOOL #7

TOOL #8



TAX SAVINGS:
IRS SECTION 179
DEPRECIATION WRITE OFF
CALCULATOR
OPEN TOOL #8

TOOL #9



ADVANTAGES WITH
INVESTMENT LEASING CO.
CALCULATOR
OPEN TOOL #9

TOOL #10



EQUIPMENT LEASING
FULL DISCLOSURE
CHECKLIST / SAVINGS
CALCULATOR
OPEN TOOL #10



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Financing Maintenance & Service Contracts


Thank you for the opportunity to present details about an innovative program Investment Leasing Company has developed to finance maintenance programs for our customers and vendors.





THE CHALLENGE: Including the cost of a multi-year maintenance agreement in an equipment lease or loan agreement has always been a challenge to lenders since customers are expected to make all of their payments without regard to the equipment or vendor's performance of their responsibilities.


Normally including one year of warranty or maintenance financing in a lease or loan agreement has been considered a reasonable time frame by most lenders but that has not suited the needs of vendors and their customers who want to be offered maintenance financing for multiple years.


THE SOLUTION: We have developed a unique 1-7+ year maintenance financing program that works!


 Your customer makes regular monthly lease payments that include software, hardware, and maintenance for up to 7 years and beyond. We pay you for the software & hardware right after delivery, and for the maintenance annually.

 We pay you for the next year's maintenance charge at the end of each year. For example, after the first year of warranty coverage expires, we pay you on month 13 for maintenance coverage for months 13-24 and so on.

 You can offer your customers the option of paying small monthly payments for their maintenance agreement rather than their having to pay a lump sum in cash at the start of each new year.

 You can retain, reduce, or eliminate the 40% discount currently offered to customers who pre-pay for maintenance for multiple years depending on market conditions and your sales strategy.

 You can eliminate the risks to your company associated with not disclosing the maintenance costs correctly on your invoices and simultaneously insuring a ready supply capital from leasing company's lenders.

 Your customers can extend the monthly payment program beyond the expiration date of the lease financing for further convenience.

Please give me a call today for further details or better yet, begin to promote this program now to your prospects!

Thank you,

Bruce Forinash

Bruce Forinash

Manager,

Phone ext. 101

brucef@investmentleasing.com

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858-451-0400 PH

858-451-0033 FAX

MAILING ADDRESS:

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SUITE # 1304-351

SAN DIEGO, CA 92128

CORPORATE ADDRESS:

11440 W. BERNARDO CT.

SUITE # 300

SAN DIEGO, CA 92127

****Please fax or scan and email completed application to: Bruce Forinash, Investment Leasing Co. brucef@investmentleasing.com fax: 858-451-0033

Name & phone number for office contents insurance:

For questions please call: 800-400-5060 x101
(Available from Quick Quote)

BUSINESS

EQUIPMENT FINANCE APPLICATION

CUSTOMER (EXACT LEGAL NAME)				DBA			
PRIMARY BUSINESS STREET ADDRESS (NO P.O. BOXES)				CITY	STATE	ZIP	FEDERAL TAX ID NO. / EIN (REQUIRED)
PHONE NO.	CELL NO.	FAX NO.		EMAIL			
BUSINESS DESCRIPTION (DETAIL BUSINESS ACTIVITIES—WHAT DOES YOUR COMPANY DO?)				YEARS IN BUSINESS	YEARS UNDER CURRENT OWNERSHIP	PREVIOUS YEAR GROSS ANNUAL SALES (REQUIRED)	
<input type="checkbox"/> CORP <input type="checkbox"/> SUB S <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> PROPRIETORSHIP <input type="checkbox"/> LLC <input type="checkbox"/> GOV'T/MUNI				TAX EXEMPT NO. (ATTACH CERTIFICATE)			
EQUIPMENT LOCATION STREET ADDRESS (NO P.O. BOXES)				CITY	COUNTY	STATE	ZIP
BILLING ADDRESS (IF DIFFERENT THAN ABOVE)				CITY	STATE	ZIP	

OWNERSHIP INFORMATION Information required for each owner (Sole Proprietor or Managing Partner of Partnership) with an equity interest of 25% or more and each guarantor as well as any one individual with a significant ability to manage or control the entity. Use addendum if needed.

OWNER / PARTNER / MEMBER / GUARANTOR	TITLE	SOCIAL SECURITY NO.	% OWNED	DATE OF BIRTH
HOME STREET ADDRESS	CITY	STATE	ZIP	HOME PHONE NO.
OWNER / PARTNER / MEMBER / GUARANTOR	TITLE	SOCIAL SECURITY NO.	% OWNED	DATE OF BIRTH
HOME STREET ADDRESS	CITY	STATE	ZIP	HOME PHONE NO.

BANK AND SECURED LOAN OR LEASE REFERENCES Use addendum if needed for additional references.

BANK / FINANCE COMPANY	CONTACT	PHONE NO.	ACCOUNT NO.
BANK / FINANCE COMPANY	CONTACT	PHONE NO.	ACCOUNT NO.

VENDOR INFORMATION

DEALER / DISTRIBUTOR NAME	CONTACT	TELEPHONE NO.
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EQUIPMENT DESCRIPTION / TERMS OF SALE If available, provide Sales Order with equipment list and pricing details as addendum.

EQUIPMENT DESCRIPTION	EQUIPMENT DESIGNATION <input type="checkbox"/> NEW <input type="checkbox"/> USED	YEAR IF USED	TERM	END-OF-TERM OPTION <input type="checkbox"/> \$1 <input type="checkbox"/> ____% <input type="checkbox"/> FMV <input type="checkbox"/> OTHER _____
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ECOA NOTICE: DISCLOSURE OF RIGHT TO REQUEST SPECIFIC REASONS FOR CREDIT DENIAL GIVEN AT TIME OF APPLICATION (BUSINESS CREDIT). If your application for business credit is denied, you have the right to a written statement of the specific reasons for denial. To obtain the statement, please contact Credit Manager, _____ within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement. Notice: 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 (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's 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 this law concerning the creditor is the Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Boulevard, Suite 100, Kansas City, MO 64108.

REPORTING AND NEGATIVE INFORMATION. We may report information about your account to credit reporting agencies. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

REPRESENTATIONS, AUTHORIZATIONS, AND AGREEMENTS. This application is for the commercial or governmental lease of goods and not for any financing for personal property to be used primarily for personal, family, or household purposes and the applicant agrees that consumer credit laws shall not apply. The applicant and each owner signing this application, and each guarantor (collectively, "you" or "your") authorize bank and its affiliates, and third parties acting for or on behalf of bank, and any assignees or transferees of any credit extended to you by bank (collectively, "we" or "us"), to check credit information, references and bank accounts and to obtain credit reports and other credit information from any credit reporting agency or credit grantor. You authorize us to hold, use, exchange and disclose information obtained by us in connection with this application or any credit provided to you by us and the administration of our contracts with you and as otherwise required or permitted by law, including without limitation any of the foregoing regarding this application or your credit experience, capacity or standing, and any credit reports, financial statements and organizational documents.

TCPA NOTICE: You agree that Bank, Bank affiliates, agents and service providers may monitor and record telephone calls regarding your account to assure the quality of service or for other reasons. You also expressly consent to Bank, Bank affiliates, agents and service providers to use written, electronic or verbal means to contact you. This consent includes, but is not limited to, contact by manual calling methods, prerecorded or artificial voice messages, text messages, e-mails and/or automatic telephone dialing systems. You agree Bank, Bank affiliates, agents and service providers may do so using any e-mail address or any telephone number you provide to us at any time, including a number for a cellular phone or other wireless device, regardless of whether charges are incurred as a result.

INDIVIDUAL AUTHORIZATION: By signing below, the undersigned individual who is either a principal of the credit applicant or a personal guarantor of its obligations, provides bank written authorization to obtain and review his/her personal consumer report from any reporting agency in connection with this application, whether or not his or her credit is being relied upon in connection with this application. If you request, bank will provide you with the name and address of the person to whom the request for any consumer report was made. You are entitled to receive certain information from that reporting agency upon request.

By signing this application, the undersigned confirms that the undersigned has read and understands this application and that the information provided in connection with this application is true, correct and complete, and authorizes bank to rely on and use it to evaluate this application.

X

APPLICANT/AUTHORIZED REPRESENTATIVE/GUARANTOR SIGNATURE	TITLE	DATE
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X

APPLICANT/AUTHORIZED REPRESENTATIVE/GUARANTOR SIGNATURE	TITLE	DATE
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****Please also send page 1 for the 3 most recent Co. bank statements, this will enable us to have a 3-month average balance without calling the bank.