

Community Enterprise Investments, Inc.
BUSINESS LOAN PROGRAMS
Information Sheet

CEII provides small business loans for start-up and expansion. The service area for this program is the following Florida counties: Bay, Calhoun, Dixie, Escambia, Gadsden, Gulf, Hamilton, Holmes, Jackson, Jefferson, Lafayette, Leon, Liberty, Madison, Okaloosa, Santa Rosa, Suwannee, Taylor, Wakulla, Walton and Washington. Some of our loan programs are available in the following Alabama counties: Autauga, Baldwin, Barbour, Bullock, Butler, Choctaw, Clarke, Coffee, Conecuh, Covington, Crenshaw, Dale, Dallas, Escambia, Geneva, Greene, Henry, Houston, Lee, Lowndes, Marengo, Mobile, Monroe, Montgomery, Perry, Pike, Russell, Sumter, Washington and Wilcox. The money borrowed under this program can be used for the purchase of machinery, equipment, furniture, fixtures, inventory and working capital. The loan can not be used to pay existing debts. The term of the loan will depend on the amount borrowed, the use of funds and the collateral offered.

As a loan applicant, you must demonstrate good character, acceptable credit, enough management expertise and commitment for a successful operation, and show that there is a reasonable assurance that the loan will be repaid.

Complete the attached application to see if you qualify for one of our loan programs.

Please submit the following:

1. Complete Application Form
2. Business Description Narrative
 - A. Marketing /Competition
 - B. Location (Lease or own)
 - C. Management
 - D. Financial Plan--1 year projection (month by month)
3. Type of ownership
 - A. Sole proprietorship
 - B. Partnership
 - C. Corporation
 1. Articles of Incorporation
 2. Stockholders and percentage of stock held
4. Support information such as bids, estimates, quotes, evidence and value of assets, equipment listing, accounts receivables listing and aging, accounts payable listing and aging. Please submit any other information that may be helpful in analyzing your request.
 - A. Current Personal Financial Statement(s) of principal(s)
 - B. Last 3 years income statements & balance sheets, current income statement and balance sheet. (for existing business only)
 - C. Last 3 years Income tax returns (Business and Personal)

ALL SUBMISSIONS MUST BE SIGNED AND DATED

Pursuant to SBA regulations all SBA Microloan borrowers will be assessed a service fee of \$100.00 at closing and \$100.00 annually. All loans will require a personal guarantee form the principal owner(s). All borrowers must provide adequate collateral; submit monthly and annual financial statements and other items as requested for adequate monitoring. CEII will pull a credit report on all principals and guarantors.

Return To: Community Enterprise Investments, Inc.
302 North Barcelona Street
Pensacola FL 32501
850-595-6234 Toll Free 888-605-2505

COMMUNITY ENTERPRISE INVESTMENTS, INC
BUSINESS LOAN PROGRAM APPLICATION

Name _____ Phone (____) _____
 Address _____
 Business Name _____ Phone (____) _____
 Address _____ City _____
 County _____ State _____ Zip _____
 Type of Business : Sole Proprietorship [] Partnership [] Corporation [] Other [] State _____
 Social Security # _____ Date of Birth _____ Employer ID# _____

INFORMATION FOR STATISTICAL PURPOSES		
BUSINESS OWNERSHIP	VETERAN STATUS	RACE/ETHNICITY
Business Owned By:	<input type="checkbox"/> Non Veteran	<input type="checkbox"/> Black <input type="checkbox"/> White <input type="checkbox"/> Hispanic
<input type="checkbox"/> Female (100%) <input type="checkbox"/> Male (100%)	<input type="checkbox"/> Vietnam-era Veteran	<input type="checkbox"/> American Indian <input type="checkbox"/> Eskimo or Aleut
<input type="checkbox"/> Female (51%) <input type="checkbox"/> Male (51%)	<input type="checkbox"/> Other Veteran	<input type="checkbox"/> Asian <input type="checkbox"/> Multi-groups

Loan Amount Requested	\$ _____	Name of your Financial Institution _____
Use of Funds:		Have you approached other funding Sources?
Preliminary Expenses	\$ _____	Yes [] No []
Machinery & Equipment	\$ _____	If yes, state name of agency or lending institution?
Working Capital	\$ _____	_____
Other _____	\$ _____	_____
Total Project Cost	\$ _____	Describe nature & value of assets to be offered as collateral
Source of Funds:	\$ _____	_____
Bank loans (identify)	\$ _____	_____
CEII Loan	\$ _____	
Other Private Sources	\$ _____	Number of Employees? _____
Other Public Sources	\$ _____	6 months after disbursement _____
Applicant Equity (Cash)	\$ _____	12 months after disbursement _____
Other _____	\$ _____	
Total	\$ _____	How did you hear about CEII's loan Programs?

Starting Date of Business _____
 Briefly describe your product/service _____

ALL ATTACHMENTS MUST BE SIGNED AND DATED

I/We authorize CEII to make all inquires deemed necessary to verify the accuracies of the statements made to determine my/our credit worthiness.

Company Representative _____
 Phone # _____ Date _____

Pursuant to SBA regulations all SBA MICROLOAN borrowers will be assessed \$100.00 at closing and \$100.00 annually. All borrowers must provide CEII with monthly and annual financial statements and other items as requested for adequate monitoring

PERSONAL FINANCIAL STATEMENT

As of _____, 20 ____

Complete this form if 1) a sole proprietorship - by the proprietor; 2) a partnership - by each partner ; 3) a corporation - by each officer & each stockholder with 20% or more ownership; 4) any other person or entity providing a guaranty on the loan.

Name _____ Home Phone _____

Home Address _____

City, State, Zip _____

Business Name of Applicant/Borrowers _____

ASSETS		LIABILITIES	
Cash on hand & in banks\$	_____	Accounts Payable\$	_____
Savings Accounts	_____	Notes Payable (to banks & Others)	_____
IRA	_____	(Describe in Section 2)	_____
Accounts & Notes Receivables	_____	Installment Account (Auto)	_____
(Describe in Section 6)	_____	Mo. Payment \$ _____	_____
Life Insurance -- Cash Value Only ...	_____	Installment Account (other)	_____
Stocks and Bonds	_____	Mo. Payment \$ _____	_____
(Describe in Section 3)	_____	Loans on Life Insurance	_____
Real Estate	_____	Stocks and Bonds	_____
(Describe in Section 4)	_____	Mortgages on Real Estate	_____
Other Personal Property	_____	(Describe in Section 4)	_____
(Describe in Section 5)	_____	Unpaid Taxes	_____
Other Assets	_____	(Describe in Section 7)	_____
(Describe in Section 5)	_____		_____
	_____	Total Liabilities	\$ _____
Total	\$ _____	Net Worth	_____
	_____	Total	\$ _____

Section 1: Source of Income	Contingent Liabilities
Salary\$	As Endorser or Co-Maker\$
Net (Investment Income).....	Legal Claims & Judgments.....
Real Estate Income.....	Provision for Fed Income Tax
Other Income (Describe).....	Other special debt

Description of Items Listed in Section 1 _____

*(Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward income.

Section 2: Notes Payable ---- Notes payable to banks, credit cards, and other financial obligations

Names and Address of Note Holder	Original Balance	Current Balance	Payment Amount	Terms -- Monthly, weekly, quarterly - etc	How Secured or Endorsed ----- Type of Collateral

Section 3: Other Stocks and Bond: Give listed and Unlisted Stocks and Bonds Information				
Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date Amount

Section 4: Real Estate Owned -- List each parcel separately. Use supplemental sheets if necessary. Each sheet must be identified as a supplement to this statement and must be signed.

Address - Type of Property	Name on Title	Date Purchased	Original Cost	Present Value	Mortgage Balance	Amount of Payment	Mortgage Balance	Status of

Section 5: Other Personal Property. (Describe property - if any are mortgaged, state name and address of mortgage holder, amount of mortgage, terms of payment, and if delinquent, describe delinquency)

Section 6: Other Assets, Notes and Accounts Receivable (Describe)

Section 7: Unpaid Taxes (Describe in detail, as to type, to whom payable, when due, amount and what, if any, property the tax lien attaches)

Section 8: Other Liabilities (Describe in detail)

Section 9: Life Insurance Held (Give face amount of policy - name of company and beneficiaries)

Lender is authorized to make all inquires deemed necessary to verify the accuracy of the statements made herein and to determine my/our creditworthiness. I/We certify the above and the statements contained in the schedules herein are a true and accurate statement of my/our financial condition as of the date stated herein

_____ Signature	_____ Spouse	_____ Date
_____ Social Security Number	_____ Social Security Number	

PERSONAL INCOME AND EXPENSE WORKSHEET

INCOME	MONTHLY
Your Salary - Commission	\$ _____
Salary - Commission (Spouse)	\$ _____
Interest	\$ _____
Rental Income	\$ _____
Pension	\$ _____
Alimony	\$ _____
Other _____	\$ _____
TOTAL INCOME	\$ _____
EXPENSES	
House (Mortgage)	\$ _____
Rent or 2nd Mortgage	\$ _____
Vacant Lane Mortgage	\$ _____
Installment Loans (Appliances)	\$ _____
Boat	\$ _____
Auto Loans	\$ _____
Truck Loans	\$ _____
Credit Cards	\$ _____
Insurance (Household)	\$ _____
Insurance (Personal)	\$ _____
Utilities (Phone, Electric, Water, etc)	\$ _____
Food	\$ _____
Clothing	\$ _____
Medical	\$ _____
Property (Maintenance)	\$ _____
Alimony	\$ _____
Child Care	\$ _____
Entertainment	\$ _____
Savings	\$ _____
Education	\$ _____
Federal Tax	\$ _____
State Tax (Intangible)	\$ _____
Property Tax	\$ _____
Misc. Expenses	\$ _____
Other _____	\$ _____
TOTAL EXPENSES	\$ _____

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302 N. Barcelona Street

Pensacola FL 32501

(850) 595-6234 or (888) 605-2505