

Alliance Funding Group (AFG) Questionnaire for Equipment Leasing & Financing Services

BANK NAME: CITY/STATE/ZIP: ASSET SIZE: LOAN TO DEPOSIT RATIO:
Is your bank interested in increasing fee income to its bottom line? Yes No
ICBA Corporate Member AFG will be rolling out an application only equipment-leasing program for your bank's customers generating fee income for your bank would you be interested in the service? Yes No
What Bank Software System is installed at Your Bank?
Do you lose equipment-leasing/financing opportunities because you are currently unable to provide this service? Yes No
Do you refer equipment-leasing/financing transactions to other leasing companies to assist your customers? Yes No If yes, who do you refer them to?
Does your Credit Department receive inquiries from either third-party leasing/financing companies directed at your commercial loan customer base?
Given your present loan limits and capital structure, are you interested in additional creditworthy loan transactions in the amount of \$300K supporting your banks client request versus losing this business to another banks offering? Yes No
Would you entertain participating in lease/financing transactions, from outside your geographic footprint with a satisfactory credit profile? The transaction could be generated from your bank that has reached its credit or legal lending exposure limit, or could be a client that generates and would like to participate out to you, again with a satisfactory credit profile. AFG would handle all the required administrative functions. Please check mark your areas of interest: In your marketing area Outside your marketing area Both, in or out of marketing area



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What type(s) of financing do you provide in y Equipment Real Estate Persona	Other:	
Do you consider yourself the following type o		
Do you currently book any leases/financing fo	or your own account? If so, how large is your lease/finance portfolio?	
If you have a lease/financing portfolio, would	you be interested in selling it?	
,	bank, who is the individual with the responsibility? Title:	
Association): State Bank Association:	ons? (Check all that apply & Name which State Association & or Bankers Bankers Association: ICBA: Other:	
	Print Name: Ext:	