

CREATE CAPITAL FUND APPLICATION

Please complete information and return to: info@createcampaignks.com, the secure upload portal at www.createcampaignks.com or by mail: Attention: Create Campaign, Inc., 2333 E. 21st St. N., Wichita, KS 67214

PERSONAL INFORMATION — Person completing form Your First Name Email Phone Your Street No. Apt. City State Zip Code COMPANY INFORMATION Name of Business Business As Stabel Agriculture Stabilization Primary Business As Owner's First Name Primary Business Owner's Comer's Comer	Date:					
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Your Mailing Address Apt. City State Zip Code						
Mailing Address State						
COMPANY INFORMATION		Street No.	Apt.	City		
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Owner's Mailing Address Secondary or Co-Business Owner's First Name Secondary or Co-Business Owner's First Name Secondary or Co-Business Owner's Email Address Secondary or Co-Business Owner's Mailing Address	-	Street Number	Apt.		City	
Mailing Address Secondary or Co-Business Owner's First Name Secondary or Co-Business Owner's Co-Business Owner's First Name Secondary or Co-Business Owner's Email Address Secondary or Co-Business Owner's Apt. City State Zip Code Zip Code					State	
Secondary or Co-Business Owner's First Name Secondary or Co-Business Owner's First Name Secondary or Co-Business Owner's Email Address Secondary or Co-Business Owner's Mailing Address					Zip Code	
Secondary or Co-Business Owner's First Name Secondary or Co-Business Owner's First Name Secondary or Co-Business Owner's Email Address Secondary or Co-Business Owner's Email Address Secondary or Co-Business Owner's Email Address Secondary or Co-Business Owner's Phone Number Apt. City State Zip Code Zip Code						
Co-Business Owner's First Name Secondary or Co-Business Owner's Email Address Secondary or Co-Business Owner's Email Address Secondary or Co-Business Owner's Email Address Secondary or Co-Business Owner's Apt. City State Zip Code Zip Code			Secondari	/ Or		
Owner's First Name Secondary or Co-Business Owner's Email Address Secondary or Co-Business Owner's Email Address Secondary or Co-Business Owner's Apt. City State Zip Code Zip Code	-					
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Co-Business Owner's Mailing Address						
Owner's Mailing Address		Street Number	Apt.		City	
Mailing Address					State	
Address					Zip Code	
	Address	Dioaco cubmit additional augasiati	ormation or	the ha	ckside of this	form

Company		Company	
Structure	☐ Sole Proprietorship	Phone	
	S Corp	Company	
	☐ C Corp☐ General Partnership	Email	
	☐ Limited Partnership	Eman	
	☐ Limited Faithership ☐ Limited Liability Company		
	Note: Nonprofit agencies do not qualify for Create Cap.	ital lending	
Company	Street No.	Apt.	City
Mailing	Street No.	7.50	State
Address			
			Zip Code
Company NAICS code(s)		Date Established	
Describe		Manufacturing	
nature of		Wholesale	
business		Retail	
Company	□ DBE	Certifying	
Certification(s)	□ MBE	Agency/ies	
	□ WBE		
Is the business	□ Yes	If yes, name	
a party in any lawsuit?	□ No	case	
lawsuit:	I.		
LOAN REQUE	EST		
Requested	P	Please note:	
Amount		Fees and closing cos	sts will be added to the loan request
Requested Tern			st-only repayment plans available
	☐ 24 months	No early pay-off per	
	☐ 36 months —	ACH payments requ	ired
	☐ 48 months		
For what			
purpose?			
Acceptable uses: Inventory			
Capital			
Equipment			
What is your plated for repayment?			
Tor repayment:			
How much are you investing to			
help cover your			
company's			
financial need?			
What is the			
source of your			
investment			
funds?			
I Danasasalo (1		
Personal Reference First Name		rsonal Reference st Name	

Reference's		Personal Reference's		
relationship to		Phone Number		
applicant				
Personal Reference's		Personal Reference's		
Email Address:		mailing address		
		(include city, state, zip)		
Professional Reference		Professional Reference		
First Name		Last Name		
Reference's		Professional Reference's		
relationship to		Phone Number		
applicant				
Professional		Professional Reference's		
Reference's		Mailing Address:		
Email Address:		(include city, state, zip)		
IMPACT				
How many	Full Time			
employees do				
you currently	Part Time			
have?	Part Time			
How many more	Full Time			
employees will				
be added as a				
result of this				
funding?	Part Time			
How much in				
sales does your				
company gross,				
on average,				
annually?				
,				
What percent of				
growth in sales				
do you think this				
funding will help				
impact?				
Please describe				
any other				
measures of				
impact an				
approved loan				
may have upon				
the current status				
of your company				
or your company	1			

	You acknowledge that the funds you're requesting will be used for a business purpose.
	YOU acknowledge that the funds you're requesting will be used for a business burbose.
	Tod dominotricage that the rands you're requesting this se asea for a susmess purposer

(See next page)

CREATE CAPITAL FUND DOCUMENTS CHECKLIST

Templates are available at https://www.createcampaignks.com/createcapital

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ut reputable sites to request your credit report.
previous to application
previous to application
rcent of the company)
ollowing business development programs: The
CORE Mentors
losure Statements
We collect information through the use of forms ded by you is also part of our application process g factors for funding. Providing inaccurate or g decision.
activities, Federal law requires all financial ntifies each person who opens an account. What n Borrower's name, address, date of birth (for dentify Borrower. Lender will verify this
poses for which it was collected (as set out of facilitate our internal business processes and/or primation may be disclosed for purposes of cit information in cases of confirmed credit fraud paign, Inc.'s products and services. Please be ur privacy policy but must adhere to their own.
ole steps to ensure the security of information our own risk.
area of economic development through
to the best of my knowledge. I n my application being rejected.

Signature

Create Capital Fund Application – Business Executive Summary

Please complete this handout and submit it with your Create Capital Fund application. For in-depth business plan assistance, please visit business development sources such as SCORE mentors (www.wichita.score.org) or the Kansas Small Business Development Center (http://webs.wichita.edu/?u=ksbdc&p=/index).

Describe when your company was launched, its owners, mission and products/services.
Describe your company's financial performance, how much funding is needed, what you will use it for and how the funding will help your company grow.