Small Firm Portfolio Loan Program (\$100K to \$600K) – Application Request

This "fillable PDF form" can be completed on a computer. **Please complete all fields.** All information will be held in strictest confidence and will not be shared or used for any purpose other than processing this request.

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Legal Entity Name:	
Primary Office Address	
Street:	
	State: Zip:
Office Phone:	Firm Website:
	Year Firm Established: Number of Equity Partners:
Other Attorneys:	Staff: Primary Areas of Firm's Practice:
	Amount of financing requested
\$	
Proposed use of funds:	
Estimated total of projected net fees in	n firm's current case inventory: \$
Does the firm currently have any finan-	cing or funding based upon its fees? Yes No
If yes, indicate current total outstanding	g balance(s): \$
If yes, lender(s)/funder(s) (they will not	t be contacted):
Primary Attorney Contact	
Name:	Position in Firm:
Email:	
Direct Phone:	Mobile Phone:
Preferred method(s) of contact: Email	Phone Preferred days/times

To Submit This Form

Law Firm

Completed form can be saved to computer using the "SAVE FORM" button below, or printed using the "PRINT FORM" button. **Send completed form as an email attachment to:** apply@AdvancedLegalCapital.com. (Upon receipt of completed form, the appropriate application package will be emailed in confidence to the contact listed above, and an initial private consultation will be arranged at your convenience.