



**COMMERCIAL FINANCE CONFERENCE OF CALIFORNIA, INC.**  
REGIONAL CHAPTER,  
COMMERCIAL FINANCE ASSOCIATION

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**MEMBERSHIP APPLICATION** \_\_\_\_\_ **RENEWAL** \_\_\_\_\_

Membership renewal is available to all current members.  
New members are required to also be members of the Commercial Finance Association.

<p>LEGAL NAME OF FIRM: _____ _____ ADDRESS: _____ _____ SUITE: _____ CITY: _____ STATE: _____ ZIP CODE: _____ PHONE: (    ) _____ FAX:    (    ) _____ WEBSITE: _____</p>	<p><b><u>DIRECTORY INFORMATION</u></b></p> <p>CATEGORY (check one): <input type="checkbox"/> BANK <input type="checkbox"/> COMMERCIAL FINANCE CO. <input type="checkbox"/> FACTOR</p> <p>Contact: (limited to six lines; 16 characters each) _____ _____ _____ _____ _____ Type of loans/size range: _____ _____ Minimum factoring volume _____ Geographic area _____</p>
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<p><b><u>2008 DUES ARE \$400</u></b></p> <p>Please make check payable to: <b>THE COMMERCIAL FINANCE CONFERENCE OF CALIFORNIA, INC.</b></p>	<p>Send payment to: <b>CHRISTYNE BUTEYN CFCC 214 Main Street, #336 El Segundo, CA 90245</b></p>
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**As a member company, you will receive 3 CFCC Membership Directories.**

**Please send our 3 CFCC Membership Directories to:**

Name \_\_\_\_\_

Address, City, St, Zip \_\_\_\_\_  
(if different from the above address)

Additional copies \$10.00 each. Please send \_\_\_\_ add'l copies.

Payment for membership and additional copies:            **MC**            **VISA**            **NO AMX**

\_\_\_ Check enclosed

\_\_\_ Credit Card

Credit Card # \_\_\_\_\_ Exp.

Date \_\_\_\_\_

Amount \$ \_\_\_\_\_