



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

MEMBERSHIP APPLICATION _____ RENEWAL _____

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

LEGAL NAME
OF FIRM: _____

ADDRESS: _____

SUITE: _____

CITY: _____

STATE: _____ ZIP CODE: _____

PHONE: () _____

FAX: () _____

WEBSITE: _____

DIRECTORY INFORMATION

CATEGORY (check one):
 BANK
 COMMERCIAL FINANCE CO.
 FACTOR

Contact: (limited to six lines; 16 characters each)

Type of loans/size
range: _____

Minimum factoring
volume _____
Geographic
area _____

2012 DUES ARE \$400

Please make check payable to:
**THE COMMERCIAL FINANCE
CONFERENCE OF CALIFORNIA, INC.**
or
Sign up at www.com-fin.com

**Send payment to:
CHRISTYNE BUTEYN
CFCC**

**214 Main Street, #336
El Segundo, CA 90245
(310) 322-0650
(310) 615-4581**

As a member company, you will receive 1 CFCC Membership Directory.

Please send 1 Free CFCC Membership Directory to:

Name _____

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

Additional copies \$20.00 each. Please send _____ add'l copies.

Payment for membership and additional copies: **MC** **VISA** **AMX**

___ Check enclosed

___ Credit Card

Credit Card # _____ Exp.

Date _____

Amount \$ _____

~ Return on or before December 17, 2011 ~