

# GOVERNMENT CAPITAL CORPORATION

## TRANSACTION INFORMATION SHEET – General Equipment

<b>Legal Name of Entity/Obligor:</b>		Federal Tax ID# -	
Physical Address:			
City:	County:	State:	Zip:
Contact Person:		Title:	
Phone (10 Digit):		Fax (10 Digit):	
Email Address:		Self-Insured? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Name of Authorized Signer:</b>		<b>Title:</b>	
Name of Board President:		Date of Board Meeting Action (past or future):	
Board Secretary/Clerk:		Attorney Phone:	
Attorney Contact:		Law Firm Name:	
Attorney Email:			
Send Invoices/Attention To:			
Invoice Address:	City:	State:	Zip:

Total Cost of Equipment: \$	Term (years) Requested:
Down Payment: \$	Source of Down Pymt (fund name):
Trade In: \$	Payment Amount: \$
Other: \$	Delivery Date:
Amount to Finance: \$	Payment: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual
Has entity made any payment for any portion of equipment being financed? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, explain:	

From which fund will the remaining contract payments be made? <input type="checkbox"/> General <input type="checkbox"/> Specify (state specific):
Has the entity ever defaulted or non-appropriated on a lease, bond, or legal obligation? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you anticipate issuing more than \$10,000,000 in tax-exempt debt in this calendar year? <input type="checkbox"/> Yes <input type="checkbox"/> No
Has Obligor issued any new debt in the current fiscal year? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please list creditor name and outstanding balances:

<b>Equipment Description:</b> (Year, Make, Model, Etc. - Attach Vendor Proposal/Quote or Contract)
<b>Essential Use:</b> If the equipment is Replacement, please provide the following: Age of the older equipment (years):                      Year Purchased: If not Replacement, please provide why the equipment needed:
Physical location of equipment after delivery:

Special Notes/Comments:
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- **Additional financial information may be requested if deemed necessary during transaction review.**
- **By signing this application Obligor representative agrees to the following statement: "Everything stated in this application is correct to the best of my knowledge. Obligee is authorized to verify any information on this application with an appropriate third party as necessary to complete the credit review process."**

Completed By (Signature):	Printed Title:
Printed Name:	Date: