

Customer Application

Please print application information. All fields must be complete. Any field left blank will result in a pending response.

| |
|-------------------|
| STORE NAME |
| STORE FAX |
| STORE SALESPERSON |
| AMOUNT REQUESTED |

CO-APPLICANTS MUST FILL OUT SEPARATE APPLICATION

If you are the co-applicant, write the Social Security # of the **Main Applicant** here: _____

APPLICANT INFORMATION

| | | | |
|--------------------------|-------------------|---|---------------|
| NAME (First Middle Last) | | SOCIAL SECURITY # | DATE OF BIRTH |
| ADDRESS | | CITY | STATE |
| [APT #] | | ZIP | |
| DRIVERS LICENSE # | STATE OF ISSUANCE | DO YOU RENT? <input type="checkbox"/> OR DO YOU OWN? <input type="checkbox"/> | |
| CELL # | PHONE # | EMAIL (used for notifications from Progressive only) | |
| { } | { } | | |

SOURCE OF INCOME (Must be verifiable)

| | | |
|--|--|--|
| EMPLOYER (S.S., RETIREMENT, PENSION, DISABILITY, SELF EMPLOYED) | HIRE DATE (MM/DD/YY) | MONTHLY INCOME |
| | / / | |
| EMPLOYER CITY, STATE, ZIP | EMPLOYER PHONE / EXT | DIRECT DEPOSIT |
| | { } | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| HOW ARE YOU PAID: (COMPLETE ONE BOX) | | LAST PAYDAY |
| <input type="checkbox"/> Every week On what day? (circle one) Mon Tues Wed Thurs Fri Sat | <input type="checkbox"/> Every other week On what day? (circle one) Mon Tues Wed Thurs Fri Sat | / / |
| <input type="checkbox"/> Twice a month On what days? _____ AND _____ | <input type="checkbox"/> Once a month On what day? _____ | NEXT PAYDAY |
| | | / / |

BANK INFORMATION (Must match information on voided check and bank statement)

| | | |
|-----------|---|-------------|
| BANK NAME | CHECKING ACCOUNT # | DATE OPENED |
| | | / / |
| ROUTING # | [Routing number is a NINE digit number located on bottom left of check] | |
| { } | | |

CREDIT CARD INFORMATION (The debit/credit card information provided will be used to make your initial payment)

| | |
|---|---------------------------------------|
| CREDIT CARD NUMBER | CREDIT CARD EXPIRATION (MONTH / YEAR) |
| { } { } { } { } { } { } { } { } { } { } | / |
| CARDHOLDER'S FIRST NAME | CARDHOLDER'S LAST NAME |
| | |
| <input type="checkbox"/> Credit Card Information is the same as Applicant Information | |

| | | | | |
|-----------------|---------|------|-------|-----|
| BILLING ADDRESS | [APT #] | CITY | STATE | ZIP |
| | | | | |

LIST TWO RELATIVES NOT LIVING WITH YOU

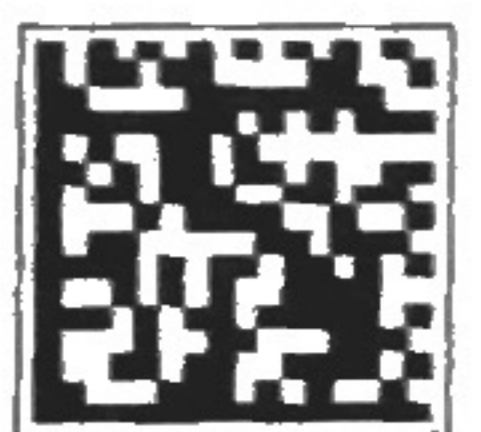
| NAME | RELATIONSHIP | CITY, STATE | PHONE # |
|------|--------------|-------------|---------|
| 1 | | | { } |
| 2 | | | { } |

I understand that I am requesting that Prog Finance, LLC, or its subsidiaries ("Progressive") enter a Lease-Purchase agreement with me, and I consent to be bound by the terms and conditions and important disclosures of the Application.

I hereby: (1) certify that all information I have provided or will provide is true, correct, and complete; (2) consent to Progressive contacting any person or company listed on my application to obtain information about me and fully release all parties from any claim that may arise out of such contact; (3) authorize Progressive to charge any credit or debit card (as described in the Application) in the amount of my initial payment if my application is approved and I execute a Lease-Purchase agreement with Progressive authorizing such a charge; (4) agree that Progressive may obtain one or more consumer reports ("Consumer Reports") in connection with either (a) my application, (b) any updates, renewals, or extensions of any transaction resulting from my application ("Transactions"), (c) the review or collection of any Transaction and (d) other legitimate business purposes related to any Transaction; and (5) understand that upon my request (a) I will be informed whether Progressive obtained Consumer Reports and, if so, the name and address of the individual or company that furnished the Consumer Reports.

SIGNATURE

DATE



7/10/2010 10:41