G'mach (Gemilus Chesed Zichron Shlomo)

In loving memory of R' Shlomo ben R' Binyomin

Applications must be filled out completely and require two cosigners.

Confidential Inquiries to G'mach should be directed to the following (please use these phone numbers only for discretion purposes):

Rabbi Meyer Roberts: 612.382.9396 meyerroberts6@gmail.com

or

Ron Mandelbaum: 952.334.6333 ron.mandelbaum@att.net

(scroll down to see application below)

Gemilas Chesed Zichron Shlomo (GCZS)

G'mach in loving memory of R' Shlomo ben R' Binyomin Z"L

Address: 2835 Salem Avenue South, St. Louis Park, MN 55416

LOAN APPLICATION

(Print all information below)

** <u>ALL</u> QUESTIONS MUST BE <u>ANSWERED IN FULL</u> AND <u>NEATLY PRINTED</u> OR APPLICATION WILL BE <u>RETURNED</u>

BORROWER'S INFORMATION:								
DATE:								
BORROWERS NAME:								
HOME ADDRESS:								
HOME PHONE:	CELL PHONE:		_ FAX:					
ARE YOU SHOMER SHABBOS?	SHUL YOU ATTE	OU ATTEND:						
EMPLOYMENT:								
OCCUPATION:	NAME OF BUSINESS OR EMPLOYER:							
BUSINESS ADDRESS:								
BUSINESS PHONE: NU	JMBER OF YEARS THERE:	TYPE	OF BUSINESS:					
CURRENT NET WEEKLY SALARY OR INCOME	("TAKE HOME PAY AFTER	TAXES AND DEDUCT	ΓΙΟΝS"): \$	00				
NAME OF YOUR BANK:	ADDRESS:							
CHECKING ACCOUNT#	SAVINGS ACCOUNT #:							
PURPOSE FOR LOAN:								
CO-MAKER #1 (Please Print)								
NAME:	ADDRE	ESS:						
HOME PHONE:	RELATIONSHIP W	ATIONSHIP WITH APPLICANT:						
EMPLOYER:	BUSINESS PHONE NUMBER:							
CO-MAKER #2 (Please Print)								
NAME:	ADDRE	ESS:						
HOME PHONE:	RELATIONSHIP W	NSHIP WITH APPLICANT:						
EMPLOYER:	BUSINI	ESS PHONE NUMBER	₹:					
TWO REFERENCES: (OTHER THAN CO-MA	KERS):							
1. NAME:	2. NAME:							
ADDRESS:	ADDRE	ESS:						
PHONE.	PHONE	F:						

(Continued on next page)

TERMS:

- Borrower shall supply a series of ____ monthly post-dated checks, totaling the entire loan.

 In the event that a check is returned by the bank as "uncollectable", or no deposit can be made due to the absence of proper checks, the comakers will be notified.
- In the event that two checks are returned by the bank (over the course of the loan) as "uncollectable", the entire loan shall be accelerated and shall be immediately due and payable in full. A demand for immediate and full payment may be requested from all co-makers. The G'mach must be immediately notified of any change in address, bank account or phone number. Failure to do so, will necessitate notification of the co-makers.

I have read all the ab	ove, and by signing	it, I agree to the terms	and conditions.					
BORROWER'S SIGNA	ATURE: (X)							
CO-MAKER #1 SIGNA	TURE: (X)							
CO-MAKER #2 SIGNA	TURE: (X)							
		PROMISSORY	NOTE					
\$		0	DATE:					
ON DEMAND, for value each of you has the duty sole and absolute discr breach of performance he	of fully performing the o	bligations set forth herein ollect the entire balance o	and that Gemilas C	hesed Zichron Sh	lomo (GCZS), in its			
Gemilas Chesed Zichron Shlomo (GCZS)								
		([OOLLARS) (\$.00)				
events of default (hereinle equity, including acceler bankruptcy of the Borrow a petition for bankruptcy, 60 days from the date of Presentment, notice Borrower and the Co-ma	perfore and hereinafter 'E ration of entire loan bater hereunder; the making or the filing against it of its filing. of presentment, dishonkers hereof. The entire agreement of the prevails over any and which are hereby meres of the State of Minnestable, it shall not effect the lid, binding and enforces.	alance: the failure to many by the Borrower hered an involuntary petition for or, notice of dishonor, put the parties hereto with red/or all prior negotiation ged herein. This Note sota. In the event any telle validity and/or enforce eable obligations of Borroged	ng the Holder hereof ake any payment hander of an assignm r bankruptcy which in protest and notice of espect to the terms as of the parties with shall be governed, rm, provision and/or ability of any other to ower and the Co-m	to all remedies a nereunder when tent for the benefit nvoluntary petition of protest are all the respect to the interpreted, conser- condition hereof erm, provision and akers. This note	vailable in law and/or in due; the insolvency or to fits creditors, filing of is not dismissed within hereby waived by the provisions hereof, and terms, conditions and strued and enforced in f is declared null, void, d/or condition hereof, all			
<u>SIGNATURES</u>		<u>FU</u>	LL NAME (PRINT	<u>'ED)</u> <u>I</u>	PHONE #			
BORROWER: (X)								
CO-MAKER #1: (X)								
CO-MAKER #2: (X)								
FOR CONFIDENTIAL INQUIR								
Ron Mandelbaum, Wireless:	952-334-6333 Email: <u>ron.m</u>	nandelbaum@att.net or Meye	r Roberts, Wireless: 6	12-382-9396 Email:	MeyerRoberts6@gmail.com			
(BELOW FOR OFFICE USE	ONLY):							
LOAN DATE:	CHECK #:	FIRST PAYMENT D	JE:	MONTHLY PAYME	ENT: \$			
REPAYMENT DATE:	REMARKS.				Rev v2 2/09			