

Please complete the information contained herein to be used in the evaluation process for a Beef 'O' Brady's Family Sports Pub.

Should you need space to provide additional supporting documents and comments, please attach the documents and comment page(s) to this form.

Prior to attending the Discovery Day process, we will request from a third party who FSC Franchise Co, chooses to obtain a consumer report and/or investigative consumer report(s).

Return either by email to your Franchise Sales Director at sslowey@fscfranchiseco.com or fax to (813) 902-7061



Application: Domes	stic US	Intl: Count	try:/		Personal:	Group or	Entity
(Will you have other i	nvestors/ow	ners or ac	ctive participan	its?):	Entity Name:		
					n form and Authoriza	tion to Release Co	<u>nsumer Credit)</u>
Email Address: _							
Applicant Personal I			- !! -!				
Name:							
Address:							
Date of Birth: Mo:	Day:	Year:	<u></u>	mployer:	da 46 a 110 i.a 46 a	Jack	daa baa dal
Date of Birth: Mo: Work Phone:			Have yo	u iivea outsi	de the US in the	last years or o	do you nave duai
Applicant Spouse Info	rmation:		Citizerisi	iip. 163	_ NO		
Name:							
Address:	D :			City:	Nl	51:	Zip:
Date of Birth: Mo:							
Employer:				_ work Phor	ie:		
Applicant Education							
High School							
College/University				Degre	ee(s) Received_		Year
Military and Busines	-	-	-				
Branch of Service/Co							
Address/Location:			Datas		T	of Ducinos	
Phone			Dates:		туре	or Business_	
Position/Duties/Res	ponsibilitie	s:					
Military and Busines	ss Experien	ce: (Prese	ent or last pos	sition first.)			
Branch of Service/Co	ompany:						
Address/Location:							
Phone						of Business	
Position/Duties/Res							
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Military and Busines	cc Evnarian	co: Dros	ent or last no	cition first)			
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Military and Busines	=	-	-				
Branch of Service/Co	ompany:						
Address/Location:							
Phone			Dates:		Type	of Business	
Position/Duties/Res	ponsibilitie	s:					
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<u>MAKETHEFOLLOWINGSTATEMENTOFALL</u> <u>ASS</u>	<u>ETSANDLIABILI</u> T <u>IES(</u>	ONTHIS S DAYOF S	20
ASSETS \$		LIABILITIES	\$
CASH ON HAND IN BANK		SECURED NOTES PAYALBE TO BANKS	
U.S. GOVERNMENT SECURITIES		UNSECURED NOTES PAYABLE TO BANKS	
ACCOUNTS, LOANS AND NOTES RECEIVABLE		NOTES PAYABLE TO RELATIVES	
CASH SURRENDER VALUEOF LIFE INSURANCE		ACCOUNTS AND NOTES PAYABLE TO OTHERS	
STOCKS AND BONDS		RENTS AND INTEREST DUE	
REAL ESTATE - HOME		TAXES DUE	
REAL ESTATE - OTHER		LIENS ON REALESTATE	
AUTOMOBILES AND NUMBER		AUTO LOANS	
OTHER ASSETTS -(itemize)		CHARGE ACCOUNTS (Itemize)	
		AS ENDORSER OR CO-MAKER	
		ON LEASES OR CONTRACTS	
		LEGAL CLAIMS	
		PROVISIONS FOR FEDERAL INCOME TAX	
TOTAL ASSETTS \$		TOTAL LIABILITIES	\$
MONTHLY INCOME AND EXE SOURCE OF MONTHLY INCOME		MONTHLY EXPENSES	
SALARY \$		RENT OR MORTGATE PAYMENT	\$
BONUS & COMMISSION		FOOD & UTILITIES	
DIVIDENDS AND INTEREST		INCIDENTALS	
REAL ESTATE INCOME		AUTO LOAN(S)	
OTHER		MEDICAL	
		CHARGE ACCOUNTS (Itemize)	
TOTAL INCOME		TOTAL EXPENSES	
HOW MUCH CAPITAL CAN YOU ALLOCAT	E TO BUY A BEEF	O'BRADY'S? \$	
WHAT IS THE CASH DOWN-PAYMENT YO	U CAN MAKE?	\$	
IF THE REQUIRED CAPITAL AMOUNT IS NOT AVAILABLE,	HOW WILL THE INVEST	MENT BE OBTAINED?	
DO YOU PLAN TO CONVERT ANY OF THE	ABOVE INTO CAS	H? YESNO	
DO YOU PLAN TO HAVE PARTNER(S)? YE	S NO IF S	O WILL PARTNERS BE ACTIVE? YES N	10
PARTNER(S) NAME			
EXPLAIN YOUR ANSWERS AND ANY OTHE	R STRATEGIES YO	OU HAVE FOR OBTAINING THE REQUIRED	FUNDS:

Tell Us About You!					
Have you ever owned your own business? If so, tell us about your experience:					
What are your personal goals in owning and operating a Beefs?					
Handiday find out the part and the Part and the Part and the Part hand to the 12					
How did you find out about the Beefs opportunity? Which Beefs have you visited?					
Special Interests (hobbies sports favorite teams etc.):					
Special Interests (hobbies, sports, favorite teams, etc.):					
Why will you be a successful Beefs owner/operator?					
This you be a successial beels owner/operator.					
List your areas of interest (city and state) for development? What is your timeframe for opening?					
Additional notes and comments from any previous sections of the application:					
Applicants Signature: Date:					
I certify that the enclosed information as given is correct and complete. This application does not guarantee or constitute the granting of a franchise from FSC Franchise Co., LLC, it is however understood that the applicant supplies the information contained herein to the best of their knowledge and ability, and the company relies on this information in assessing the desirability and qualification of each applicant.					



Authorization and Release to Obtain A Consumer and/or Investigative Consumer Report

I/we, the undersigned consumer(s) do hereby authorize FSC Franchise Co., LLC and its affiliated companies, by and through its independent contractor(s). CIC, INC ("CIC"), or third party who FSC Franchise Co, chooses to obtain a consumer report and/or investigative consumer report on me/us.

These above-mentioned reports may include, but are not limited to: employment and education verifications; personal references; personal interviews, my/our personal credit history based upon our reports form any credit bureau; driving history; including traffic citations; a social security number verification; present an d former addresses; criminal and civil history/records; any other public records; and any other information bearing on my/our credit standing, credit capacity, credit worthiness, character, general reputation, personal characteristics, trustworthiness and/or mode of living.

I/we understand that I am entitled to a complete and accurate disclosure of the nature and scope of any investigative consumer report prepared on me/us upon my/our written request to CIC that is made within reasonable time after the date hereof.

I/we further authorize any person, business entity or governmental agency who may have information relevant to the above to disclose the same to FSC Franchise Co., LLC and its affiliated companies, by and through its affiliated companies, CIC, including but not limited to, any courthouse, any public agency, any and all law enforcement agencies and all credit bureaus, regardless of whether such person, business entity or government agency compiled the information itself or received it from other sources.

I/we release FSC Franchise Co., LLC., and its affiliated companies, CIC, and any and all persons, business entities and government agencies, where public or private, from any and all liability, claims and/or demands, of whatever kind, to me/us, my heirs or others making such claim or demand on my behalf, for procuring, selling, providing, brokering and/or assisting with the compilation or preparation of the consumer report and/or investigative consumer report hereby authorized.

A photocopy/faxed copy of this release will be as valid as an original, even though the said photocopy/faxed copy does not contain an original writing of my signature.

The following is my/our true a complete legal name and all information is true and correct to the best of my knowledge.

Date:	
First Name:	
Middle Initial:	
Last Name:	
Maiden Name:	
Other Name(s):	
Street Address:	
City/State/Zip:	
County:	
Race/Sex:	
Social Security Number:	
Date of Birth:	
Drivers Lic#/ST:	
Have you been in a principal Bankrupt	
Adjudication?	
Have you been convicted of a felony?	
Provide details:	
Have you any lawsuits pending? Provide	
details:	
List counties/States you have lived in the	
past 5 years.	