

DBA Name		JAMESKONEDO	ENTERPRISE	l e	egal Name	JAMESKONEDO	ENTERPRISE	
Type of Business		trucking			ax ID	597430923		Sole Prop
Full Business Addre	955	12500 merit dr						50.0 T. op
Full Billing Address	.55	TESOS IIICITE GI						
Phone at Location		(437) 224-5702			Best Phone		Fax	
Business Email		jameskonedoer			Website			
Years In Business		<u>,</u> 8m	Average Tic	ket		Gross Annual Sa	ales 480,000.00	
Do you currently ha	ave cash a	advance?		— Vith who?			Balance	
Current Credit Card				_		Processing Volun		
	i Flocesso				-	riocessing voluin		
Last Month Vol.		#of Tid	ckets		2nd Month Vol.		#of Tickets	
3rd Month Vol.		#of Tid	kets		4th Month Vol.		#of Tickets	
Owner #1 Name		nes konedo		Title				
Date of Birth	24-02-19			SSN	597-43-09	)23		
Full Home Address	378 jacob lane micknney tx 75069							
Home Phone	(437) 224	I-5702 Cell	Phone		Email	jameskor	nedoent@gmail.com	
Own/Rent	\$ 0 Rent	t Yea	rs There 2	D	rivers Lience # $\frac{4}{2}$	1917750	State texas	
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address								
Home Phone		Cell	Phone		Email			
Own/Rent	\$	Yea	rs There	D	rivers Lience # _		State	
Business Home Bas	ed?	No Locatio	n: Lease/Own	Leased	Lease Teri	m	Monthly Rent	
			20030, 0 1111			-		
Landlord / Mortgage	e Co				Conta	_		
Contact Phone	_		Cell	_		Email		
Bank Name/Branch			Contact			Phone		
Trade Reference#1			— Contact			Phone		
Trade Reference#2			— Contact			Phone		
Trade Reference#3			— Contact			Phone		
I hereby represent that all	the above in	formation is true and I	inderstand that ma	king false stat	tements might he con	sidered fraud. By provi	iding the above informati	on the applicant(s)

I hereby represent that all the above information is true and understand that making false statements might be considered fraud. By providing the above information, the applicant(s) authorize you to whom this application is made or your agents to investigate my/our financial responsibility and credit worthiness, specifically principal and corporate entities, and will provide financial statements, tax returns, etc. as you deem necessary. A photocopy of this authorization will be deemed as acceptable for release of credit information. I/We authorize Money Works Direct, Inc. to receive pertinet information regarding the commercial lease for the above referenced location from my leasing company and or agent. I/we authorize you to update my/our credit profile from time to time in the future, as you deem appropriate. By signing below, each of the aboe listed business and business ownet/officer (individually and collectiverly, "you") authorize Money Works Direct and each of its representatives, successors, assigns and designees ("Recipients") that may be involved with or acquire commercial loans having daily repayment features or purchases of future receivables including Merchant Cash Advance transcation, including without limitation the application therefor (collectively, "Transcation") to obtain consumer or personal, business and investigative reports and other information about you, including credit card processor statements and bank statements, from one or more consumer reporting agencies, such as TransUnion, Experian and Equifax, and from other credit bureaus, banks, creditors and other third parties. You also authorize Money Works Direct to transmit this application form, along with any of the foregoing information obtained in connection with this application, to any or all of the Recipients for the foregoing purposes. You also consent to the release, by any creditor or financial institution, of any information relating to any of you, to Money Works Direct and to each of the Recipients, on its own behalf.

Signature#1	Printed Name	kevin james konedo	Date	09/11/2019