Money Works Direct ADMINISTRATIVE FORI	M PLEASE FAX TO:1.646.417.5809
--	--------------------------------

DBA Name		n/a		L6	egal Name	frank's fabricatio	n,welding , and repair	
Type of Business		welding		Т	ax ID	47-4702931		LLC
Full Business Addre	:SS	23605 e 157th	ave brighton c	o 80603				
Full Billing Address								
Phone at Location		(720) 476-881	.7		Best Phone		Fax	
Business Email		franksfab.weld	l.repair@gmail	l.com	Website			
Years In Business		2	Average Ti	cket		Gross Annual Sal	es <u>80,000.00</u>	
Do you currently h	ave cash a	advance?	No	With who? _			Balance	
Current Credit Card	d Processo	or			_ Average	Processing Volume	e	
Last Month Vol.		#of T	ickets		2nd Month Vol.		#of Tickets	
3rd Month Vol.		#of T	ickets		4th Month Vol.		#of Tickets	
Owner #1 Name	Francisco	Nino		Title	owner			
Date of Birth	12291976	6		SSN -	456-41-28	26		
Full Home Address	610 dahli	a st hudson co 80	642					
Home Phone	(720) 476	5-8817 Ce	ll Phone		Email	franksfab.	weld.repair@gmail.com	
Own/Rent	\$ <u>0 Own</u>	1 Y6	ears There 2		Privers Lience # $\frac{9}{2}$	90390200	State <u>co</u>	
Owner #2 Name				Title	-			
Date of Birth				SSN -	<u></u>			
Full Home Address			II Phone		Email			
Home Phone					Email			
Own/Rent	\$	Ye	ears There		Privers Lience # _		State	
Business Home Bas	sed?	No Locati	on: Lease/Owr	Leased	Lease Teri	m	Monthly Rent	
Landlord / Mortgage	e Co				Conta	act		
Contact Phone	_		Ce	ell		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	Lunderstand that n	naking falso sta	etements might be sen	sidered fraud. By provid	ing the above information, the a	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 relating to any of you, to Money Works Direct and to each of the Recipients, on its own behalf.

Signature#1	Printed Name	Francisco Nino	Date	05/23/2017