

DBA Name		Devote Food Group		Leg	gal Name	Bradley Pritchard		
Type of Business		Food		Tax	( ID	253374349		Sole Prop
Full Business Addre	ess	110 Richardsor	Rd #15a Calho	oun GA 3070	1		_	
Full Billing Address								
Phone at Location		(404) 597-1561		Ве	est Phone (404)	597-1561	Fax	
Business Email		Devote80@gmail.com			Website	Www.devotefood.com		
Years In Business		4	Average Tic	ket		Gross Annual S	ales <u>90,000.00</u>	
Do you currently h	ave cash	advance?	No V	With who?			Balance	
Current Credit Card Processo		or			Average	Processing Volu	me	
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	Devote P	ritchard		Title	Master Cod	ok		
Date of Birth	08/08/19	80		SSN	253-37-43	49		
Full Home Address	110 Richardson rd #15a							
Home Phone	(404) 59	7-1561 Ce	ll Phone		Email	devote8	0@gmail.com	
Own/Rent	\$ <u>0</u> Ren	t Ye	ears There 10	Dri	vers Lience # 0	55165837	State Ga	
O				T:H -				
Owner #2 Name  Date of Birth				Title SSN				
Full Home Address				JJN				
Home Phone		Ce	II Phone		Email			
Own/Rent	\$		ears There	Dri	vers Lience #		State	
Business Home Bas	sed?	Yes Locati	on: Lease/Own	Leased	Lease Terr	n	Monthly Rent	0.00
Landlord / Mortgag	e Co				Conta	ct _		
Contact Phone	_		Cel	I		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 ir	nformation is true and	understand that m	aking false state	ments might be cons	sidered fraud. By prov	viding the above informa	tion, 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	Devote Pritchard	Date	05/04/2017