

DRA Name									
Full Business Address   Full Business Address   Care   Ca						_	·	ystems, LLC	
Phone at Location   C210) 667-6641   Best Phone (210) 667-6641   Fax					Т	ax ID	274341520		LLC
Phone at Location   Cal   10 667-6641   Fax   Sest Phone   Cal   10 67-6641   Fax   Sest Phone   Sest Phon		SS	2479 N Heidel	ke St					
Business Email	Full Billing Address								
Years In Business         7         Average Ticket         Gross Annual Sales         1,200,000.00           Do you currently have cash advance?         No         With who?         Balance           Current Credit Card Processor         Average Processing Volume           Last Month Vol.         #of Tickets         2nd Month Vol.         #of Tickets           3rd Month Vol.         #of Tickets         4th Month Vol.         #of Tickets           Owner #1 Name         Adriene         Title         President           Date of Birth         10-10-1974         SSN         462-81-1170           Full Home Address         113 Boeing Corner         Home Phone         (210) 659-6493         Cell Phone         (210) 667-6641         Email         daniel@dpxpower.com           Own/Rent         \$ 0 own         Years There         10         Drivers Lience # 09563597         State         TX           Owner #2 Name         Title           Date of Birth         SSN         SSN         Finall         TX           Owner #2 Name         Title         State           Divers Lience # Date of Birth         State           Full Home Address         Home Phone         Cell Phone	Phone at Location		(210) 667-66	41	Best Phone (210) 667-6641 Fax				
Do you currently have cash advance?   No   With who?   Balance	Business Email		daniel@dpxp	ower.com		Website	www.dpxpower.com		
Average Processing Volume	Years In Business		7	Average Tic	ket		Gross Annual	Sales <u>1,200,000.0</u>	0
Business Home Based?   No   Location: Lease/Own   Morth Vol.   Lase Term   Monthly Rent	Do you currently ha	ave cash	advance?	No V	Vith who? _			Balance	
Signature   Sign	Current Credit Card	l Process	or			Average	Processing Vol	ume	
Owner #1 Name         Adrienne         Title         President           Date of Birth         10-10-1974         SSN         462-81-1170           Full Home Address         113 Boeing Corner         Total Boeing Corner           Home Phone         (210) 659-6493         Cell Phone         (210) 667-6641         Email         daniel@dpxpower.com           Own/Rent         \$ 0 Own         Years There         10         Drivers Lience # 09563597         State         TX           Owner #2 Name         Title           SSN           Full Home Address           Home Phone         Cell Phone         Email         State         State           Own/Rent         \$ Years There         Drivers Lience # State         State         State           Business Home Based         No         Location: Lease/Own         Owned         Lease Term         Monthly Rent           Landlord / Mortgage         Co. Security Bank         Contact           Contact Phone         Cell         Email           Bank Name/Branch         Chase/Shertz         Contact         Yvonne         Phone         (210) 590-1244           Trade Reference#1         SCA Power Systems         Contact	Last Month Vol.		#of	Tickets		2nd Month Vol.		#of Tickets	
Date of Birth         10-10-1974         SSN         462-81-1170           Full Home Address         113 Boeing Corner         Home Phone         (210) 659-6493         Cell Phone         (210) 667-6641         Email         Jame         Title           Owner #2 Name         Title         SSN         Full Home Address           Home Phone         Cell Phone         Email         State           Own/Rent         \$ Years There         Drivers Lience #         State           Business Home Based?         No         Location: Lease/Own         Owned         Lease Term         Monthly Rent           Landlord / Mortgage         Co.         Security Bank         Contact           Contact Phone         Cell         Email           Bank Name/Branch         Chase/Shertz         Contact         Yvonne         Phone         (210) 590-1244           Trade Reference#1         SCA Power Systems         Contact         Chad Hamon         Phone         (208) 660-3345	3rd Month Vol.		#of	Tickets		4th Month Vol.		#of Tickets	
Date of Birth         10-10-1974         SSN         462-81-1170           Full Home Address         113 Boeing Corner         Home Phone         (210) 659-6493         Cell Phone         (210) 667-6641         Email         daniel@dpxpower.com           Own/Rent         \$ 0 Own         Years There         10         Drivers Lience #         09563597         State         TX           Owner #2 Name         Title         SSN         Fmail           Date of Birth         SSN         Email         Own/Rent         State           Own/Rent         \$ Years There         Drivers Lience #         State           Business Home Based?         No         Location: Lease/Own         Owned         Lease Term         Monthly Rent           Landlord / Mortgage         Co.         Security Bank         Contact           Contact Phone         Chase/Shertz         Contact         Yvonne         Phone         (210) 590-1244           Trade Reference#1         SCA Power Systems         Contact	Owner #1 Name	Adrianna			Titlo	President			
Full Home Address Home Phone  (210) 659-6493  Cell Phone (210) 667-6641  Email  daniel@dpxpower.com  Own/Rent  S 0 0wn  Years There 10  Drivers Lience # 09563597  State  TX   Owner #2 Name  Date of Birth SSN  Full Home Address Home Phone  Cell Phone Email  Own/Rent  S Years There Drivers Lience # State   Business Home Based? No  Location: Lease/Own Drivers Lience # State   Business Home Based? Contact Phone Cell Phone Cell Phone Cell Phone Drivers Lience # State  Contact  Contact Phone Contact Phone Contact Phone Contact Yvonne Phone Class/Shertz Contact Contact Contact Phone Contact Contact Chase/Shertz Contact Contact Chase/Shertz Contact Contact Chad Hamon Phone Contact Contact Chad Hamon Phone Contact Contact Contact Chad Hamon Phone Contact Contact Contact Chad Hamon Phone Contact Contact Contact Contact Contact Chad Hamon Phone Contact Contact Contact Contact Contact Contact Chad Hamon Phone Contact									
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Own/Rent         \$ 0 Own         Years There         10         Drivers Lience # 09563597         State         TX           Owner #2 Name         Title           Date of Birth         SSN         SSN           Full Home Address         Femail         SSN           Home Phone         Cell Phone         Email           Own/Rent         \$ Years There         Drivers Lience #         State           Business Home Based?         No         Location: Lease/Own         Owned         Lease Term         Monthly Rent           Landlord / Mortgage Co.         Security Bank         Contact           Contact Phone         Cell         Email           Bank Name/Branch         Chase/Shertz         Contact         Yvonne         Phone         (210) 590-1244           Trade Reference#1         SCA Power Systems         Contact         Glenn Trcelak         Phone         (904) 860-3316           Trade Reference#2         Power Systems Services         Contact         Chad Hamon         Phone         (208) 660-3345				ell Phone	(210) 667-6	6641 Fmail	daniel	adpxpower.com	
Owner #2 Name  Date of Birth  Full Home Address  Home Phone  Cell Phone  Email  Own/Rent  Years There Drivers Lience #  State   Business Home Based? No Location: Lease/Own  Contact Phone  Cell Phone  Email  Contact Phone Contact Phone Cell  Email  Contact Phone Contac					-	<del></del>			
Date of Birth Full Home Address Home Phone Own/Rent SSN  Cell Phone Email Own/Rent State  Business Home Based? No Location: Lease/Own Owned Lease Term Landlord / Mortgage Co. Security Bank Contact Phone Cell Bank Name/Branch Chase/Shertz Contact Contact Phone Contact Co	· · · · · · · · · · · · · · · · · · ·	¥ <u>* * * * * * * * * * * * * * * * * * *</u>	<u> </u>	<u> </u>					
Full Home Address Home Phone  Cell Phone  State  Drivers Lience #  State  Business Home Based? No Location: Lease/Own Owned Lease Term Monthly Rent  Landlord / Mortgage Co. Security Bank  Contact Phone  Cell Email  Bank Name/Branch Chase/Shertz  Contact  Trade Reference#1  SCA Power Systems  Contact C	Owner #2 Name				Title				
Home Phone   Cell Phone   Email	Date of Birth				SSN				
Own/Rent \$ Years There Drivers Lience # State  Business Home Based? No Location: Lease/Own Owned Lease Term Monthly Rent  Landlord / Mortgage Co. Security Bank Contact  Contact Phone Cell Email  Bank Name/Branch Chase/Shertz Contact Yvonne Phone (210) 590-1244  Trade Reference#1 SCA Power Systems Contact Glenn Trcelak Phone (904) 860-3516  Trade Reference#2 Power Systems Services Contact Chad Hamon Phone (208) 660-3345	Full Home Address								
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Landlord / Mortgage Co. Security Bank Contact  Contact Phone Cell Email  Bank Name/Branch Chase/Shertz Contact Yvonne Phone (210) 590-1244  Trade Reference#1 SCA Power Systems Contact Glenn Trcelak Phone (904) 860-3516  Trade Reference#2 Power Systems Services Contact Chad Hamon Phone (208) 660-3345	Own/Rent	\$	Y	ears There	D	rivers Lience # _		State	
Contact Phone  Cell  Email  Bank Name/Branch Chase/Shertz Contact Yvonne Phone (210) 590-1244  Trade Reference#1 SCA Power Systems Contact Glenn Trcelak Phone (904) 860-3516  Trade Reference#2 Power Systems Services Contact Chad Hamon Phone (208) 660-3345	Business Home Bas	ed?	No Locat	tion: Lease/Own	Owned	Lease Ter	m	Monthly Rent	
Bank Name/Branch Chase/Shertz Contact Yvonne Phone (210) 590-1244  Trade Reference#1 SCA Power Systems Contact Glenn Trcelak Phone (904) 860-3516  Trade Reference#2 Power Systems Services Contact Chad Hamon Phone (208) 660-3345	Landlord / Mortgage	e Co. S	ecurity Bank			Conta	act		
Trade Reference#1 SCA Power Systems Contact Glenn Trcelak Phone (904) 860-3516  Trade Reference#2 Power Systems Services Contact Chad Hamon Phone (208) 660-3345	Contact Phone			Cel	l		Email	-	
Trade Reference#2 Power Systems Services Contact Chad Hamon Phone (208) 660-3345	Bank Name/Branch	Chase/S	Shertz	Contact	Yvonne		Phone	(210) 590-1244	
	Trade Reference#1	SCA Po	wer Systems	Contact	Glenn T	rcelak	Phone	(904) 860-3516	
Trade Reference#3 S&E Suppy Contact Sergio Rivera Phone (504) 289-1425	Trade Reference#2	Power 9	Systems Servic	es Contact	Chad Ha	amon	Phone	(208) 660-3345	
	Trade Reference#3	S&E Su	рру	Contact	Sergio F	livera	Phone	(504) 289-1425	

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	Daniel Holbrook	Date	03/28/2017
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