MoneyWorks)	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Alexis

DDA N		IKC F- ···	lu Camilana				WC Family Camina		
DBA Name		JK&FamilyServices			Legal Name		JK&FamilyServices	_	
Type of Business			lyServices		Tax ID		JK&FamilyServices LI	LC	
Full Business Addre	SS	812 McC	onathy rd					_	
Full Billing Address		(227) 26				(227)	200 1201	—	
Phone at Location		(337) 200-1321			Best Phone (337)		200-1321 Fax		
Business Email		jkandfar		<del></del>			—		
Years In Business		1 yr Average Tic		e Ticket	:t		Gross Annual Sales 97,000.00	—	
Do you currently h	ave cash	advance?	Yes	With wh	o? <u>Kabba</u>	ge,recapital	Balance <u>3154</u>	_	
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	Jim Beasl			<del></del>	Title	General Ma	<u> </u>		
Date of Birth	10/08/19				SSN	419-13-589	98		
Full Home Address Home Phone	(337) 200	onathy Rd	Cell Phone	(227) 2	00-1321	Ema :I	ikan diamikusan ikas Ogmail sam		
			<del></del>			Email —	jkandfamilyservices@gmail.com	—	
Own/Rent	\$ <u>0 Owr</u>	1	Years There	1yr	Drivers	Lience # 01	.1581144 State LA LA		
Owner #2 Name					Title				
Date of Birth					SSN			—	
Full Home Address	-							_	
Home Phone			Cell Phone			Email		_	
Own/Rent	\$ Own		Years There		Drivers	Lience #	State		
Business Home Bas	ed?	No	Location: Lease/0	Own Ow	ned	Lease Tern	n Monthly Rent		
Landlord / Mortgage						– Conta			
	_			C-II	_	Conta		_	
Contact Phone	_			Cell			Email	_	
Bank Name/Branch	Chase		Cont	act			Phone		
Trade Reference#1			Cont	act			Phone	_	
Trade Reference#2			Cont	act			Phone		
Trade Reference#3			Cont	act			Phone		
								=	

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	Jim Beasley	Date	03/26/2017