

DBA Name	Crafted Palette	Legal Name	Crafted Palette, llc
Type of Business	Cafe / Paint and Sip	Tax ID	47-2454511 LLC
Full Business Address	130 West Street Reno, NV 89501		
Full Billing Address			
Phone at Location	(775) 409-4781	Best Phone	(916) 276-7699 Fax
Business Email	craftedpalette@gmail.com	Website	www.craftedpalette.com
Years In Business	2	Average Ticket	Gross Annual Sales 190,000.00
Do you currently have cash advance?	Yes	With who?	Balance 9500
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	Gail Knight	Title	Managing Owner
Date of Birth	09081960	SSN	518-90-6478
Full Home Address	360 Kilborne Ave Reno, NV 89509		
Home Phone	(916) 276-7699	Cell Phone	(916) 276-7699 Email knightappraiser@gmail.com
Own/Rent	\$ 0 Rent	Years There	5 Drivers Lience # 0203606260 State NV
Owner #2 Name		Title	
Date of Birth		SSN	
Full Home Address			
Home Phone		Cell Phone	Email
Own/Rent	\$	Years There	Drivers Lience # State

Business Home Based?	No	Location: Lease/Own	Leased	Lease Term	Monthly Rent
Landlord / Mortgage Co.	Westlyn Appts		Contact	Angela Johnson	
Contact Phone	(844) 256-2586	Cell		Email	

Bank Name/Branch	Bank of America	Contact	Branch Manager	Phone	(775) 267-5842
Trade Reference#1	LA Bakery	Contact	Ali	Phone	(775) 885-2253
Trade Reference#2	Waffle Envy	Contact	Kevin Murray	Phone	(775) 232-4463
Trade Reference#3	The Plaza Resort Club	Contact	Dan Duerst	Phone	(775) 786-2200

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 pertinent 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 above listed business and business owner/officer (individually and collectively, "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 transaction, including without limitation the application therefor (collectively, "Transaction") 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

Gail Knight

Date

07/28/2017