

DBA Name		Mildred Dravich		L	egal Na	me	Badin Lake 0	General Store	
Type of Business		General Store and Landscaping Services		ng .	Tax ID		47-238064		Sole Prop
Full Business Addres	ss 2	2496 Blaine Road	, New Londor	n NC 2812	7				
Full Billing Address									
Phone at Location	ion (336) 461-2066				Best Phone (513)		382-6396	Fax	
Business Email	mittydravich@gn		nail.com		Website				
Years In Business	-	1.5	Average Tic	ket _			Gross Annual Sales 175,000.00		
Do you currently ha	ve cash a	idvance?	No V	With who?				Balance	
Current Credit Card Processor Average Processing Volume									
Last Month Vol.		#of Ticl	kets		2nd M	onth Vol.		#of Tickets	
3rd Month Vol.		#of Ticl	kets		4th M	onth Vol.		#of Tickets	
Owner #1 Name	Mildred Dr	ravich		Title	е	Owner			
Date of Birth	09-22-195	55		SSN	J	166-44-019	93		
Full Home Address	108 Cando	or Oaks Drive							
Home Phone	(513) 382-6396 Cell Phone (513) 3			(513) 382-	6396	Email	mittyc	dravich@gmail.com	
Own/Rent	\$ <u>0 Own</u>	Year	s There 1 y	ear 8 mont	h Drivers	Lience #	33393612	State NC	
Owner #2 Name				Title	9				
Date of Birth				SSN	J				
Full Home Address - Home Phone		Call I	?hono			Email			
Own/Rent	\$ Cell Phone \$ Years There			Drivers Lience #			State		
OWITKEIL	\$				JIIVEIS L				
Business Home Base	ed?	No Location	n: Lease/Own	Leased	<u></u>	Lease Tern	n	Monthly Rent	
Landlord / Mortgage	Co. Me	elba Awtrey				Conta	ct	Melba Awtrey	
Contact Phone	(3	36) 461-4581	_ Cel	l _			Emai	<u> </u>	
Bank Name/Branch	First Ban	nk Denton NC	Contact				Phone	(336) 859-4556	
Trade Reference#1	Monroe Hardware		Contact	Contact Austen			Phone	(704) 989-6041	
Trade Reference#2	‡2 Interstate Battery		_ Contact	ontact Jeff Smi			 Phone	(704) 856-9180	
Trade Reference#3	RH Barri	nger	Contact				– Phone –	(336) 964-0448	

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 TransDinion, 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	Mildred Fravich	Date	08/31/2016