MoneyWorks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Julian
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DBA Name	1964		Legal Name	1964	
Type of Business	organic f	arming	Tax ID	203998367	Corp
Full Business Addre		mitridge Dr, Diamond			33.р
Full Billing Address			20., 00, 02, 00		-
Phone at Location	(626) 35	3-6098	Best Phone	Fax	_
Business Email		anicgroup@gmail.con			_
Years In Business	13	Average Tick		Gross Annual Sales 200,0	00.00
Do you currently h	ave cash advance?	 Yes W	ith who? swift	Balance 2	000
Current Credit Card	d Processor		Average	Processing Volume	
Last Month Vol.		#of Tickets	2nd Month Vol.	#of Tickets	5
3rd Month Vol.		#of Tickets	4th Month Vol.	#of Tickets	5
Owner #1 Name	Shih Hsu		Title CEO		
Date of Birth	10-23-1964		SSN 610-92-25	581	
Full Home Address	2416 Batson Ave, Ro	wland Hts, Ca, 91748			
Home Phone	(626) 353-6098	Cell Phone	Email	drhsuorganicgroup@gma	ail.com
Own/Rent	\$ <u>0 Own</u>	Years There 10	Drivers Lience # b	7642675 State C	CA
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 Bas	sed? No L	ocation: Lease/Own	Leased Lease Terr	mMonthly Re	ent
Landlord / Mortgag	e Co		Conta	act	
Contact Phone		Cell		Email	
Bank Name/Branch	Bank of America	Contact		Phone	
Trade Reference#1		Contact		Phone	
Trade Reference#2		 Contact		Phone	
Trade Reference#3		Contact		Phone	
I hereby represent that all	the above information is t	rue and understand that mak	king false statements might be con	sidered fraud. By providing the above inf	formation, 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	Shih Hsu	Date	05/23/2018