Money	Morks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809
MOHE	VVOIRS	Sales Rep: Luciano

DBA Name		Jbi inc.				Loc	ıal Name	Jbi ind				
Type of Business								08-4599017			Corp	
Full Business Addre		320 east charleston blvd., suite 105, lv, r					<del>-</del>		199017			Согр
	:55	320 eas	Cilaries	ton bivu., s	uite 10	3, IV, IIV	09104					
Full Billing Address  Phone at Location		(702)	173-0640			D.	oct Phono			Fax	(702)	473-9641
Business Email		(702) 473-9640				Best Phone		—— hiarussi <i>i</i>		(102)	475-9041	
Years In Business			Joseph@josephiarussi.com  8 Average Ticket				<del>-</del>		Josephiarussi.com  Gross Annual Sales 200,000.00			
		8								_		
Do you currently h	ave cash	advance	?	No	With	who?					ce	
Current Credit Card	d Process	sor					Averag	e Process	ing Volu	me		
Last Month Vol.			#of Tid	kets _		2	2nd Month Vol.			#of Ti	ckets	
3rd Month Vol.			#of Tid	kets _			4th Month Vol.	·		#of Ti	ckets	
Owner #1 Name	Joseph I	arussi				Title	Presiden	t				
Date of Birth	07/12/19	977				SSN	181-66-7	7526				
Full Home Address	1416 sa	nta marga	rita street	#d lv nv 891	L46							
Home Phone	(702) 47	73-9640	Cell	Phone	(702	2) 488-23	00 Email		joseph@	josephiarus	si.com	
Own/Rent	\$ <u>0 Ow</u>	<i>ı</i> n	Yea	rs There	10	Dri	vers Lience #	21035904	85	State	Neva	da
Owner #2 Name						Title						
Date of Birth						SSN						
Full Home Address												
Home Phone			Cell	Phone			Email					
Own/Rent	\$		Yea	rs There		Dri	vers Lience #			_State		
Business Home Bas	sed?	No	Locatio	n: Lease/O	wn <u>l</u>	Leased	Lease Te	rm <u>5</u>	years	Month	ly Rent	1,600.00
Landlord / Mortgag	e Co.	North cap	realty				Cont	tact	_	Glenda sha	aw	
Contact Phone	<u>-</u>	(702) 333	3-4455	(	Cell				Email	Gsh	aw@nirt	hcap.com
Bank Name/Branch	Bank c	of america	Э	Conta	ct Jo	ordan the	omson	Pł	none			
Trade Reference#1				— Conta	ct			 Ph	none			
Trade Reference#2	-			— Conta	ct —			 Ph	one -			
Trade Reference#3				— Conta					one -			
I hereby represent that all	the above i	information	is true and ι	 understand tha	t making	false state	ments might be co	onsidered fra	aud. By pro	viding the abo	ve informa	tion, 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	Joseph larussi	Date	06/21/2017