

DBA Name		SPATIAL AUDIO			Le	Legal Name		SPATIAL COMPUTER			
Type of Business		S CORP			Tax ID		75551	7555153-0160			Corp
Full Business Addre	SS	6300 SA	GEWOOD	DRIVE							
Full Billing Address											
Phone at Location (435) 640-1294			40-1294		В	est Phone <u>(4</u>	35) 640-12	94	Fax	(435) 6	647-9304
Business Email spatialaudio.us@			udio.us@	gmail.com		Website	www.s	www.spatialaudio.us			
Years In Business		8			Average Ticket		Gross A	Gross Annual Sales 35			
Do you currently ha	ave cash	advance?	•	No W	/ith who? _				Balar	nce	
Current Credit Card Processor						Avera	ge Process	ing Volur	me		
Last Month Vol.			#of Tick	ets		2nd Month Vo	ol		#of Ti	ckets	
3rd Month Vol.			#of Tick	ets		4th Month Vo	ol		#of Ti	ckets	
Owner #1 Name	CLAYTON	I SHAW			Title	PRESID	DENT				
Date of Birth	07-03-1957				SSN	443-60	443-60-1199				
Full Home Address	6464 LIB	ERTY PEAK	LANE								
Home Phone	(435) 640	0-1294	Cell Ph	none	(435) 640-12	294 Email		spatialau	ıdio.us@gr	nail.com	
Own/Rent	\$ 0 Ren	t	 Years	There 4	Dr	ivers Lience #	151502909	9	State	UTAH	
Owner #2 Name					Title						
Date of Birth					SSN						
Full Home Address											
Home Phone			Cell Pl	none -		Email					
Own/Rent	\$		_ Years	There	Dr	ivers Lience #			_State		
Business Home Bas	ed?	No	Location:	Lease/Own	Leased	Lease T	erm		Month	ly Rent	
Landlord / Mortgage	e Co. <u>D</u>	ABB AND	CO.			Co	ntact	<u> </u>	MONIKA G	RIFF	
Contact Phone	(8	801) 566	8991	Cell				Email	bor	neville1@	bec1.com
Bank Name/Branch	WELLS	FARGO N	A	Contact			Ph	one	(435) 615	-4480	
Trade Reference#1	TRIM-AI	RT		Contact	TYLER N	AY	Ph	one –	(801) 589	-9602	
Trade Reference#2	TDJ FIN	ISHING		Contact	TOM WA	LKER	Ph	one –	(801) 936	-4264	_
Trade Reference#3	EVETT I	DESIGN		Contact	DAVID E	VETT	Ph	one _	(385) 888	-6999	

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	CLAYTON SHAW	Date	11/10/2017
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