MoneyWorks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809
VIOLEY VIOLES	Sales Rep: Kevin

DBA Name		I&I mobile t	ire services	Le	egal Name	I&i mobile tire se	rvices	
Type of Business		Tires/			ax ID	81-2646359		LLC
Full Business Addre	ess	1085 windy	hill rd smyrna ga 3	30080				
Full Billing Address								
Phone at Location		(678) 403-8	3029		Best Phone		Fax	
Business Email		Info@iandit	ires.com		Website	www.ianditires.co	om	
Years In Business		2	Average Tic	ket		Gross Annual Sale	es <u>100,000.00</u>	
Do you currently h	ave cash a	advance?	No V	With who? _			Balance	
Current Credit Card	d Processo	or			Average	Processing Volume		
Last Month Vol.		#c	of Tickets		2nd Month Vol.		#of Tickets	
3rd Month Vol.		#c	of Tickets		4th Month Vol.		#of Tickets	
Owner #1 Name	ljeoma Ag	•		Title				
Date of Birth	10221986			SSN	258-81-32	263		
Full Home Address		circle mabelto	on ga 30126					
Home Phone	(404) 694	l-3592 ————————————————————————————————————	Cell Phone		Email	agurd21@y	/ahoo.com	
Own/Rent	\$ <u>0 Own</u>	<u> </u>	Years There	D	rivers Lience # 0)57837917 S	State Georgia	
O #2 No				Title				
Owner #2 Name Date of Birth				. SSN				
Full Home Address								
Home Phone			Cell Phone		Email			
Own/Rent	\$		Years There		rivers Lience #		itate	
Ownyntent	Ψ <u></u>							
Business Home Bas	sed?	No Loc	ation: Lease/Own	Leased	Lease Ter	m	Monthly Rent	
Landlord / Mortgag	e Co				Cont	act		
Contact Phone	_		Cel	l <u> </u>		Email		
Bank Name/Branch			Contact			Phone		
Trade Reference#1			Contact			Phone		
Trade Reference#2			 Contact			 Phone		
Trade Reference#3			Contact			Phone		
I hereby represent that all	the above in	formation is true	and understand that m	aking false sta	tements might be cor	nsidered fraud. By providir	ng the above information,	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	ljeoma Agurd	Date	08/09/2017