MoneyWorks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: John
	- Saids Mep. Je

DBA Name		Fabulous Re	staurant and Ca	atering L	egal Name	Fabulous Re	estaurant and	Catering	
Type of Business Restaurant			Т	Tax ID	46-2299229	46-2299229		Corp	
Full Business Addre	SS	2602 Bloomii	ngton ave, Minn	eapolis MN 5	5407				
Full Billing Address									
Phone at Location (651) 366-0802				Best Phone (65	51) 366-0802	Fax			
Business Email		saredojama73@hotmail.com			Website				
Years In Business		4	Average T	icket		Gross Annua	l Sales <u>5</u> 0	00,000.00	
Do you currently ha	ave cash	advance?	Yes	With who?			Balan	ce	
Current Credit Card	d Process	or			_ Averaç	ge Processing Vo	olume		
Last Month Vol.		#o	f Tickets		2nd Month Vo	l	#of Tio	kets	
3rd Month Vol.		#o	f Tickets		4th Month Vo	l	#of Tic	kets	_
Owner #1 Name	Saredo Ja	ama		Title	e Owner				
Date of Birth	0915197			SSN		5-47			
Full Home Address		th ave Minneapo	olis MN 55421	_					
Home Phone	(651) 36		Cell Phone	(651) 366-0	0802 Email	Sared	do@hotmail.cor	n	
Own/Rent	\$ 0 Ren	nt	Years There		Drivers Lience #	H968009994723	State	MN	
			_						
Owner #2 Name				Title	2				
Date of Birth				— SSN					
Full Home Address									
Home Phone			Cell Phone		Email				
Own/Rent	\$		Years There _		Privers Lience #		State		
Business Home Bas	ed?	No Loc	ation: Lease/Ow	n <u>Leased</u>	Lease Te	erm	Monthl	y Rent	
Landlord / Mortgage	e Co				Cor	ntact			
Contact Phone	<u>(</u>	612) 990-733	3 C	ell _		Ema	il		
Bank Name/Branch			Contac	t		Phone			
Trade Reference#1			 Contac	t		Phone			
Trade Reference#2			Contac	t		Phone	_		
Trade Reference#3			 Contac	t		Phone			
I hereby represent that all	the shows in	oformation is true	and understand that	making falso sta	stamanta miaht ha a	onsidered fraud. By	aravidina tha aha	information the applica	

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	Saredo Jama	Date	09/13/2017
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