

DBA Name	Werk Management		Legal Name		Mancione Inc.			
Type of Business	Property Management		Tax ID		36-3936546		Corp	
Full Business Addre	ss 8102 Lemont Rd. S	Suite 1200 Wo	odridge, Il	60517				
Full Billing Address								
Phone at Location	(630) 241-0001		В	est Phone (630)	297-4605	Fax	(630) 241-0001	
Business Email	lisa@werkmanag	ement.com		Website	werkmanager	ment.com		
Years In Business	23	Average Tick	et		Gross Annual S	Sales <u>1</u>	,000,000.00	
Do you currently ha	ave cash advance?	No Wi	ith who? _			Balan	ce	
Current Credit Card Processor Average Processing Volume								
Last Month Vol.	#of Tick	ets		2nd Month Vol.		#of Ti	ckets	
3rd Month Vol.	#of Tick	ets		4th Month Vol.		#of Ti	ckets	
Owner #1 Name	Jack Mancione		Title	CEO				
Date of Birth	05-10-1963		SSN	323-42-18	29			
Full Home Address	8015 Fairmount Ave Downers Grove, II 60516							
Home Phone	(630) 297-4605 Cell Pl	none		Email	lisa@we	erkmangeme	ent.com	
Own/Rent	\$ <u>0 Own</u> Years	There 21	Dr	ivers Lience # M	525-4326-5134	State	Illinois	
Owner #2 Name			Title					
Date of Birth			SSN					
Full Home Address								
Home Phone	Cell Pl	_		Email				
Own/Rent	\$ Years	There	Dr	ivers Lience #		State		
Business Home Bas	ed? <u>No</u> Location:	Lease/Own	Leased	Lease Terr	n	Month	ly Rent	
Landlord / Mortgage	e Co			Conta	ict			
Contact Phone	<u>-</u>	Cell			Email			
Bank Name/Branch	Barrington	Contact	Angela J	ohnson	Phone	(847) 842	-2613	
Trade Reference#1	Home Depot	Contact	Mike (pro	o desk manager) Phone	(630) 271	-9600	
Trade Reference#2	Complete Supply	Contact	Justin		Phone	(630) 325	i-9044	
Trade Reference#3	Atj's Home Improvements	Contact	Tomas		Phone —	(630) 432	-3238	

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 authorize 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	Jack Mancione	Date	08/23/2016
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