

Type of Business Address	DBA Name	william martinez II	Legal N		Name	william martinez llc			
Phone at Location Common	Type of Business transportation		Tax ID			463718780		LI	.LC
Phone at Location C570 412-0626 Best Phone C570 412-0626 Fax (484) 544-7918	Full Business Addre	ss 335 palmetto drive	easton pa 1	18045					
Business Email	Full Billing Address								
Years In Business 2 Average Ticket Gross Annual Sales 360,000.0∪ Do you currently have cash advance? Yes With who? greenbox Balance 7200 Current Credit Card Processor Average Processing Volume Last Month Vol. #of Tickets 2nd Month Vol. #of Tickets 3rd Month Vol. #of Tickets 4th Month Vol. #of Tickets Owner #1 Name WILLIAM Martinez Title owner Date of Birth 08-10-1978 SSN 116-62-0767 Full Home Address 335 palmetto drive easton pa 18045 Inchested the particular of the particu	Phone at Location	(570) 412-0626		Best Ph		412-0626	Fax	(484) 544-7918	
Do you currently have cash advance? Yes With who? greenbox Average Processing Volume	Business Email	will0878@gmail.co	om	Website					
Average Processing Volume Last Month Vol. # of Tickets 2nd Month Vol. # of Tickets 3rd Month Vol. # of Tickets 2nd Month Vol. # of Tickets Owner #1 Name WILLIAM Martinez Titlle owner Date of Birth 08-10-1978 SSN 116-62-0767 Full Home Address 18 Home Phone (570) 412-0626 Cell Phone (570) 412-0626 Email will0878@gmail.com Own/Rent \$ 0 Rent Years There 2 Drivers Lience # 28969904 State pa Own/Rent \$ 0 Rent Years There 2 Drivers Lience # 28969904 State pa Full Home Address Home Phone Cell Phone Email willows State pa Own/Rent \$ 7 Years There Drivers Lience # 28969904 State State Business Home Based? Years There Drivers Lience # 28969904 State 1,000.00 Business Home Based? Yes Location: Lease/Own	Years In Business	2	Average Tic	ket		Gross Annual	Sales <u>36</u>	0,000.00	
Month Vol.	Do you currently have cash advance?		res V	With who? greenbox		Balance 7200			
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Date of Birth Date of Birth Pull Home Address SSN 116-62-0767 SSN Date of Birth Pull Home Address SSN Date of Birth Date of Birth SSN Date of Birth Date of Bir	3rd Month Vol.	#of Tickets 4th Month Vol. #of Tickets						kets	
Date of Birth O8-10-1978 SSN 116-62-0767	Owner #1 Name	WILLIAM Martinez		Title	owner				
Full Home Address					-	7			
Nome Phone Common Common			8045	3311		•			
Own/Rent \$0 Rent Years There 2 Drivers Lience # 28969904 State pa Title Date of Birth Full Home Address Home Phone Cell Phone Email Own/Rent \$ Years There Drivers Lience # State Business Home Based? Yes Location: Lease/Own Leased Lease Term 8 Monthly Rent 1,000.00 Landlord / Mortgage Co. sahar elkohly Contact Phone (570) 436-3882 Cell Email Bank Name/Branch Santander bank william pe Trade Reference#1 dyanamic wholesale Contact tim reeve Phone (907) 619-3479 Trade Reference#2 acerra Contact kathy downey Phone (516) 759-4012				(570) 412-0626	Email	will08	78@gmail.com		
Date of Birth Full Home Address Home Phone Own/Rent SSN Cell Phone Drivers Lience # Business Home Based? Yes Location: Lease/Own Leased Lease Term Contact Phone Contact Phone Contact Phone Contact Phone Contact Phone Contact Phone Contact Contact Phone Contact Contact Phone Contact Contact Phone Contact	Own/Rent	\$ 0 Rent Years	- There 2	Drivers	— 5 Lience # 28!	969904	State	pa	
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Trade Reference#2 acerra Contact kathy downey Phone (516) 759-4012	Bank Name/Branch		Contact	daisy		Phone	(610) 250	-9614	
	Trade Reference#1	dyanamic wholesale	Contact	tim reeve		– Phone	(907) 619	-3479	
Trade Reference#3 pilot Contact Phone (877) 866-7378	Trade Reference#2	erence#2 acerra		kathy down	ey	– Phone	(516) 759	-4012	
	Trade Reference#3	pilot	Contact			Phone	(877) 866	-7378	

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 relating to any of you, to Money Works Direct and to each of the Recipients, on its own behalf.

iignature#1	Printed Name	WILLIAM Martinez	Date	11/17/2016
ignature#1	Printed Name	WILLIAM Martinez	Date	11/17/2016