MoneyWorks Direct ADMINISTRATIVE FORM PLEASE FAX TO: 1.646.4	17.5809
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Type of Business	DBA Name		Abbel Ren	ts & Sel	ls, inc.	Le	egal N	ame	Abbe	el Rents	& Sells, Inc		
Full Business Address Full Billing Address Phone at Location    1937   298-0114   Best Phone   Best Processor					<del></del>		31-1				Corp		
Phone at Location		SS							•				·
Business Email   Business   47	Full Billing Address												
Years In Business         47         Average Ticket         Gross Annual Sales         389,500.00           Do you currently have cash advance?         No         With who?         Balance           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           3rd Month Vol.         #of Tickets         4th Month Vol.         #of Tickets           Owner #1 Name         Carolyn Martin         Title         President/Owner           Date of Birth         06/13/1944         SSN         284-40-4080           Full Home Address         647 Banbury Road         Banbury Road         Babelrents@fuse.net           Home Phone         (937) 603-0516         Cell Phone         (937) 603-0576         Email         abbelrents@fuse.net           Own/Rent         \$ 0 Own         Years There         20         Drivers Lience # RHB79011         State         OH           Owner #2 Name         Cell Phone         Email         Email         State           Date of Birth         \$ Years There         Drivers Lience # State         State           Business Home Based?         No	Phone at Location				Best Phone					Fax	(937)	299-9611	
Do you currently have cash advance?	Business Email		abbelrents@fuse.net			Website		abbe	elrents.co				
Current Credit Card Processor	Years In Business		47 Average Tic		cket		Gross	Gross Annual Sales 389			0		
Last Month Vol.	Do you currently ha	ave cash a	ndvance?		No \	With who? _					Balaı	nce	
Owner #1 Name         Carolyn Martin         Title         President/Owner           Date of Birth         06/13/1944         SSN         284-40-4080           Full Home Address         647 Banbury Road         Full Home Address         647 Banbury Road           Home Phone         (937) 603-0516         Cell Phone         (937) 603-0576         Email abbelrents@fuse.net           Own/Rent         \$ 0 Own         Years There         20 Drivers Lience # RH879011         State OH           Owner #2 Name         Title         SSN           Date of Birth         SSN           Full Home Address           Home Phone         Cell Phone         Email           Own/Rent         \$ Years There         Drivers Lience # State           Business Home Based?         No Location: Lease/Own         Owned Lease Term Monthly Rent           Landlord / Mortgage Co.         Contact           Contact Phone         Email           Bank Name/Branch         WrightPatt Credit Union         Contact         Brenda         Phone         (912) 873-8738           Trade Reference#1         Anchor Industries         Contact         Bregy         Phone         (614) 307-6552	Current Credit Card	l Processo	r						e Proces				
Owner #1 Name         Carolyn Martin         Title         President/Owner           Date of Birth         06/13/1944         5SSN         284-40-4080           Full Home Address         647 Banbury Road         Home Phone         (937) 603-0516         Cell Phone         (937) 603-0576         Email         abbelrents@fuse.net           Own/Rent         \$ 0 Own         Years There         20         Drivers Lience # RH879011         State         OH           Own/Rent         S 0 Own         Years There         SSN         Email           Own/Rent         \$ Years There         Drivers Lience # State         State           Business Home Based?         No         Location: Lease/Own         Owned         Lease Term         Monthly Rent           Landlord / Mortgage Co.         Cell         Contact         Email           Bank Name/Branch         WrightPatt Credit Union         Contact         Brenda         Phone         (912) 873-8738           Trade Reference#1         Anchor Industries         Contact         Peggy         Phone         (800) 544-4445           Trade Reference#2         Event Source         Contact         Brian         Phone         (614) 307-6552	Last Month Vol.		#	of Ticke	ets		2nd I	Month Vol.			#of T	ickets	
Date of Birth         06/13/1944         SSN         284-40-4080           Full Home Address         647 Banbury Road         Home Phone         (937) 603-0516         Cell Phone         (937) 603-0576         Email         abbelrents@fuse.net           Own/Rent         \$ 0 Own         Years There         20         Drivers Lience # RH879011         State         OH           Owner #2 Name         Title         SSN           Full Home Address         Home Phone         Cell Phone         Email         State           Own/Rent         \$ Years There         Drivers Lience #         State           Business Home Based?         No         Location: Lease/Own         Owned         Lease Term         Monthly Rent           Landlord / Mortgage         Contact Phone         Cell         Email           Bank Name/Branch         WrightPatt Credit Union         Contact         Brenda         Phone         (912) 873-8738           Trade Reference#1         Anchor Industries         Contact         Peggy         Phone         (614) 307-6552	3rd Month Vol.		#	of Ticke	ets		4th N	Month Vol.			#of T	ickets	
Date of Birth         06/13/1944         SSN         284-40-4080           Full Home Address         647 Banbury Road         Full Home Phone         (937) 603-0516         Cell Phone         (937) 603-0576         Email         abbelrents@fuse.net           Own/Rent         \$ 0 Own         Years There         20         Drivers Lience # RH879011         State         OH           Owner #2 Name         Title         SSN           Full Home Address         Home Phone         Cell Phone         Email         State           Own/Rent         \$ Years There         Drivers Lience #         State           Business Home Based?         No         Location: Lease/Own         Owned         Lease Term         Monthly Rent           Landlord / Mortgage         Contact Phone         Cell         Email           Bank Name/Branch         WrightPatt Credit Union         Contact         Brenda         Phone         (912) 873-8738           Trade Reference#1         Anchor Industries         Contact         Peggy         Phone         (614) 307-6552	Owner #1 Name	Carolyn M	artin			Title		President	t/Owner				
Full Home Address					_								
Home Phone	Full Home Address	647 Banb	ury Road					-					
Owner #2 Name Date of Birth SSN Full Home Address Home Phone Cell Phone Email Own/Rent State  Own/Rent State  Drivers Lience # State  Business Home Based? No Location: Lease/Own Owned Lease Term Monthly Rent Landlord / Mortgage Co. Contact Phone Cell Email  Bank Name/Branch WrightPatt Credit Union Contact Brenda Phone (912) 873-8738 Trade Reference#1 Anchor Industries Contact Peggy Phone (800) 544-4445 Trade Reference#2 Event Source Contact Brian Phone (614) 307-6552	Home Phone		-	Cell Ph	ione	(937) 603-0	576	Email		abbelr	ents@fuse.n	et	
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Landlord / Mortgage Co.  Contact Phone  Cell  Email  Bank Name/Branch WrightPatt Credit Union Contact Brenda Phone (912) 873-8738  Trade Reference#1 Anchor Industries Contact Peggy Phone (800) 544-4445  Trade Reference#2 Event Source Contact Brian Phone (614) 307-6552	Own/Rent	\$		Years	inere	D	rivers	Lience #			State		
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Trade Reference#2 Event Source Contact Brian Phone (614) 307-6552	Bank Name/Branch	WrightP	att Credit U	Inion	Contact	Brenda			F	hone	(912) 873	3-8738	
	Trade Reference#1	Anchor	ndustries		Contact	Peggy			 P	hone	(800) 544	1-4445	
Trade Reference#3 Manufacturer Contact Kevin Mulligan Phone (800) 539-0616	Trade Reference#2	Event S	ource		Contact	Brian			P	hone	(614) 307	7-6552	
	Trade Reference#3	Manufac	turer		Contact	Kevin M	ulliga	n	 F	hone	(800) 539	9-0616	

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	Carolyn Martin	Date	01/30/2017