

DBA Name		Vision Chrysler Jeep Dodge RAM of Defiance			of Le	gal Name	Vision Autor	Vision Automotive, LLC		
Type of Business		Automotive Sales and Service			Tax	k ID	472163292		_	LLC
Full Business Addre	20390 County Road 424 Defiance Ohio 43512									
Full Billing Address										
Phone at Location		(419) 782-7373			Best Phone			Fax		
Business Email	Business Email				Website		visionautos.	visionautos.com		
Years In Business		2	Averaç	ge Ticket			Gross Annual	Sales 23	3,500,000.00	
Do you currently have cash advar		advance?	No	With	who?			Baland	ce	
Current Credit Card Processor						Averag	e Processing Vo	lume		
Last Month Vol.		#	of Tickets		2	2nd Month Vo		_ #of Tic	kets	
3rd Month Vol.		#	of Tickets			4th Month Vol		_ #of Tic	kets	
Owner #1 Name	Robert Pa	arish			Title	Presider	nt			
Date of Birth	10-14-19	72			SSN	302-82-	4796			
Full Home Address	5841 Gre	5841 Green Ivy Lane Monclova, Ohio 43542								
Home Phone	(419) 782	2-7373	Cell Phone			Email	rob.pa	rish@visionau	tos.com	
Own/Rent	\$ <u>0 Owr</u>	1	Years There	13	Driv	vers Lience #	RS613456	State	Ohio	_
Owner #2 Name	Guadalup	oe Cantu Jr.			Title	CEO				
Date of Birth					SSN	296-76-	7729			
Full Home Address	1208 Apache Drive Wauseon, Ohio 43567									
Home Phone			Cell Phone			Email				
Own/Rent	\$ Own		Years There	2	Driv	vers Lience #	RN240475	State	Ohio	-
Business Home Bas	ed?	No Lo	cation: Lease,	/Own	Leased	Lease Te	erm	Monthly	y Rent	
Landlord / Mortgage	e Co. <u>R</u>	RPLC Holding	s, LLC			Con	tact			
Contact Phone	_			Cell			Emai	l		
Bank Name/Branch			Cor	ntact _			Phone			
Trade Reference#1			Con	ntact			Phone	_		<u> </u>
Trade Reference#2			Cor	ntact			Phone			
Trade Reference#3			Cor	ntact			Phone			
I hereby represent that all authorize you to whom this will provide financial state authorize Money Works Diauthorize you to update my	s applicatior ments, tax rect, Inc. to	n is made or you returns, etc. as receive pertinet	ur agents to inves you deem necess t information rega	tigate my/o sary. A phot arding the c	ur financial cocopy of th ommercial l	responsibility and is authorization when the second is a second in the s	I credit worthiness, s will be deemed as acc we referenced location	pecifically princi ceptable for relea n from my leasin	pal and corporate of ase of credit inform ng company and or	entities, and nation. I/We agent. I/we

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	Robert Parish	Date	01/20/2017
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