

DBA Name	Papa the Butcher		Legal Name	Jak Markets LLC	
Type of Business	Retail Meat, Deli, Seafood, Food to Go		Tax ID	Papa the Butcher	LLC
Full Business Address	95 West Wellsboro Street				
Full Billing Address					
Phone at Location	(570) 662-7885		Best Phone	(570) 662-7885	Fax
Business Email	papa@papathebutcher.com		Website	papathebutcher.com	
Years In Business	1.5	Average Ticket		Gross Annual Sales	625,000.00
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.	
3rd Month Vol.		#of Tickets		4th Month Vol.	

Owner #1 Name	Gabriel Greco		Title	Owner	
Date of Birth	07-26-1954		SSN	184-38-7296	
Full Home Address	40 Rolling Acres Road				
Home Phone	(570) 662-7652	Cell Phone	(570) 772-2135	Email	papa@papathebutcher.com
Own/Rent	\$ 0 Own	Years There	1.5	Drivers Lience #	1477515
				State	PA
Owner #2 Name			Title		
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.	First Citizens Community Bank			Contact	Kevin Green
Contact Phone	(570) 662-2121	Cell		Email	kgreen@firstcitizensbank.com

Bank Name/Branch	First Citizens Community Bank	Contact	Kevin Green	Phone	(570) 662-2121
Trade Reference#1	Imler Poultry	Contact	Donna Imler	Phone	(814) 943-5563
Trade Reference#2	John F Martin	Contact	Anne	Phone	(717) 336-2804
Trade Reference#3	Lycoming Bakery	Contact	Matt	Phone	(570) 326-9426

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 pertinent 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 owmet/officer (individually and collectively, "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 informaiton 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

Gabriel Greco

Date

08/11/2016