	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Julian
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DBA Name	Marketplace		Leg	gal Name	Marketplace,	Inc		
Type of Business	Food Wholesale to Fed Gov		Tax ID		364816475		Corp	
Full Business Address 1353 Riversone Pkwy, #120-172, Canton GA 30114								
Full Billing Address								
Phone at Location	(877) 733-3630		Best Phone (678		851-5604	Fax	(877) 733-3630	
Business Email	ryan@marketplacefoodsgroup		o.com Website		www.marketplacefoodsgroup.com			
Years In Business	3	Average Tick	ket		Gross Annual	al Sales <u>2,200,000.00</u>		
Do you currently ha	ave cash advance?	Yes W	ith who? Sv	wift		Balanc	e <u>60000.00</u>	
Current Credit Card	l Processor			Average	Processing Vol	ume _		
Last Month Vol.	#of Tic	kets		2nd Month Vol.		#of Ticl	cets	
3rd Month Vol.	#of Tic	kets	4th Month Vol.			#of Tickets		
Owner #1 Name	Ryan Bowersox		Title	President				
Date of Birth	02-02-1979		SSN	520-13-87	 76			
Full Home Address	444 Claude Scott Rd, Canton	GA 30115	55.1					
Home Phone	·		(678) 851-56	i04 Email	ryanbs	ox@gmail.com	1	
Own/Rent	\$ 0 Rent Yea	rs There	Dri	ivers Lience #	State			
Owner #2 Name			Title					
Date of Birth			SSN					
Full Home Address								
Home Phone	Cell Phone		Email					
Own/Rent	\$ Yea	rs There	Dri	ivers Lience #		State		
Business Home Bas	ed? Yes Location	n: Lease/Own	Leased	Lease Tern	n	Monthly	Rent	
Landlord / Mortgage	e Co			Conta	ct			
Contact Phone		Cell			Email			
Bank Name/Branch	Chase Bank	Contact	Fred		Phone	(678) 493-3	3580	
Trade Reference#1	Pride of Iowa	 Contact	Zack Woo	ods	 Phone	(319) 642-5	5554	
Trade Reference#2	McClancy	— Contact	Kathy		 Phone	(803) 548-2	2366	
Trade Reference#3	Littler Brokerage	— Contact —	Tom Little	er	Phone	(404) 229-9	9606	

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.

Vorks Direct and to each of the Recipients, on its own behalf.			 		
Signature#1	Printed Name	Ryan Bowersox	Date	01/11/2018	