

DBA Name	FIVE STAR PACKING		Legal Name	HERAZ CONSULTING INC	
Type of Business	Labor Contractors and Crew Leaders		Tax ID	47-1225253	Corp
Full Business Address	437 W 5TH ST HOLTSVILLE CA 92250				
Full Billing Address					
Phone at Location	(760) 356-4103		Best Phone	(760) 554-8439	Fax (760) 283-0301
Business Email	HERAZGABE76@GMAIL.COM		Website		
Years In Business	10	Average Ticket		Gross Annual Sales	2,000,000.00
Do you currently have cash advance?	Yes	With who?	PLATINUM AND SFS		Balance 20K, 5K
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	GABE HERAZ		Title	OWNER	
Date of Birth	02/08/1976		SSN	616-12-9570	
Full Home Address	1341 BARARA WORTH DRIVE HOLTVILLE CA 92250				
Home Phone	(760) 554-8439	Cell Phone		Email	HERAZGABE76@GMAIL.COM
Own/Rent	\$ 0 Rent	Years There		Drivers Lience #	B5446179 State CA
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	Leased	Lease Term		Monthly Rent	450.00
Landlord / Mortgage Co.	AHIZZA MARES			Contact	7603562932		
Contact Phone		Cell		Email			

Bank Name/Branch	Contact	Phone
Trade Reference#1	Contact	Phone
Trade Reference#2	Contact	Phone
Trade Reference#3	Contact	Phone

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 above listed business and business owner/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 transaction, including without limitation the application therefor (collectively, "Transaction") 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	GABE HERAZ	Date	01/16/2019
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