

DBA Name		Conscious				egal Na	me	Conscious K	itchen LLC	
Type of Business		Restaurar			T	ax ID		462911822		LLC
Full Business Addre	SS	2912 Vine	Street							
Full Billing Address										
Phone at Location		(513) 281	-2525			Best Ph	one <u>(513)</u>	208-3324	Fax _	
Business Email						We	bsite			
Years In Business		3	Ave	erage Tick	et			Gross Annua	I Sales <u>360,00</u>	00.00
Do you currently ha	ave cash	advance?	No	W	ith who? _				Balance	
Current Credit Card	d Process	or				_	Average F	Processing Vo	lume	
Last Month Vol.		#	of Tickets			2nd M	onth Vol.		#of Tickets	
3rd Month Vol.		#	of Tickets			4th M	onth Vol.		#of Tickets	
Owner #1 Name	Vonnoch	a Carpenter			Title		owner			
Date of Birth	0110197	· · ·			SSN		548-45-458			
Full Home Address		rose Avenue			3311					
Home Phone	(513) 20		Cell Phone	. (513) 208-3	1324	Email	consc	iouskitchen513@gn	mail com
Own/Rent	\$ 0 Ren		Years The	_	2083324 D		-	332657		H
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Owner #2 Name					Title					
Date of Birth					SSN					
Full Home Address										
Home Phone			Cell Phone	!			Email			
Own/Rent	\$		Years The	re	D	rivers Li	ience #		State	
Business Home Bas	ed?	No Lo	cation: Lea	ase/Own	Leased	ı	Lease Term	l	Monthly Re	nt
Landlord / Mortgage	e Co. L	Jptown Prop	erties				Contac		—— Mike Mendralsk	i
Contact Phone	<u>(</u>	513) 324-13	00	Cell				_ Ema	il	
Bank Name/Branch	First Fir	nancial Bank	((Contact	Melanie	Smith		Phone	(513) 657-7735	5
Trade Reference#1				Contact				- Phone		
Trade Reference#2				Contact				- Phone		
Trade Reference#3				Contact				- Phone	_	
I hereby represent that all	the above in	oformation is tru	o and underst	and that mak	ving falso sta	tomonts	might he consi	dered fraud Pyr	aroviding the above infe	ermation, the applicant(s)

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	Damien Hopwood	Date	01/03/2018