MoneyWorks >>	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: John

DBA Name		Rampant Society			Le	egal Name	Rampant Society LLC			
Type of Business		3.5 years		T	ax ID	473610540			Corp	
Full Business Addre	:SS	1800 Mo	nument Blv	d						
Full Billing Address										
Phone at Location		(925) 826-5241				Best Phone (760	)) 799-7602	Fax		
Business Email		rampan	tsociety@gr	mail.com		Website	www.rampant	society.cor	n	
Years In Business		3.5	A	verage Tick	et		Gross Annual S	Sales 2	64,000.00	
Do you currently h	ave cash	advance?	N	lo W	ith who? _			Balan	ce	
Current Credit Card	d Processo	or	_			Average	Processing Volu	me		
Last Month Vol.			#of Ticket	s		2nd Month Vol.		#of Tid	ckets	
3rd Month Vol.			#of Ticket	s		4th Month Vol.		#of Tid	ckets	
Owner #1 Name	Suren Ch	andrasena			Title	Owner				
Date of Birth	0318198	7			SSN	626-34-69	924			
Full Home Address	2805 Jeff	erson Ln								
Home Phone	(760) 799	9-7602	Cell Pho	ne		Email	rampan	tsociety@gn	nail.com	
Own/Rent	\$ 0 Ren	t	Years Tl	here 2	D	rivers Lience # _ [	09757201	State	CA	_
Owner #2 Name					Title					
Date of Birth					SSN					
Full Home Address										
Home Phone			Cell Pho	_		Email				
Own/Rent	\$		Years Tl	here	D	rivers Lience # _		State	_	_
Business Home Bas	sed?	No	Location: L	ease/Own	Leased	Lease Ter	m	Monthl	y Rent	
Landlord / Mortgage	e Co. <u>V</u>	VPPM				Cont	act .	925248503	30	
Contact Phone	_			Cell	_		Email			
Bank Name/Branch	Bank O	f America		Contact			Phone			
Trade Reference#1	·		<u> </u>	Contact			Phone			
Trade Reference#2				Contact			Phone			
Trade Reference#3				Contact			Phone			
I hereby represent that all	the above in	formation is	true and under	stand that mal	king false sta	tements might be cor	nsidered fraud. By pro	viding the abo	ve information, th	e 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	Suren Chandrasena	Date	11/14/2018