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

DBA Name		Poor a	f		Leg	gal Name	Please Help			
Type of Business	Begging				Tax ID		000001			Sole Prop
Full Business Addre	ess	123 nor	no st							
Full Billing Address										
Phone at Location	(123) 456-7890			Best Phone (123) 456-7890	Fax	(123)	456-7890	
Business Email	beggar@gmail.com			om	Website		imtoopoortoaffordasite.org			
Years In Business		0		Average Ticke	et		Gross Annual	Sales	10.00	
Do you currently h	ave ca	sh advance	e?	No	Wi	th who?			Balance	<u> 0 </u>
Current Credit Care	d Proce	essor		VISA		Average	Processing Volu	ıme	2	
Last Month Vol.	0		#of Tick	ets		2nd Month Vol.	0	#of 7	ickets	
3rd Month Vol.	0		#of Tick	ets		4th Month Vol.	0	#of T	ickets	
Owner #1 Name	Ibeg Y	00			Title	Head Beg	gar			
Date of Birth	0234-	06-20			SSN	324-23-34	123			
Full Home Address	homel	ess								
Home Phone	(123)	456-7890	Cell P	hone		Email	ibegyo	o@gmail.co	om	
Own/Rent	\$ 0 0)wn	Years	There 0	Dri	vers Lience # <u>c</u>	an't drive	State	califo	rnia
Owner #2 Name					Title					
Date of Birth	0000-	00-00			SSN					
Full Home Address										
Home Phone			Cell P	hone		Email				
Own/Rent	\$		Years	There	Dri	vers Lience # _		State		
Business Home Bas	ed? _	No	Location	Lease/Own	Owned	Lease Ter	m <u>242</u>	Mont	hly Rent	324.00
Landlord / Mortgage	e Co.	342				Conta	act	342		
Contact Phone		(432) 423	3-4234	Cell	(32	24) 234-2342	Email	<u>sfj</u>	skj@ssf.co	om
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 authorize you to whom thi will provide financial state	s applica	tion is made of	or your agents	to investigate my	our financial	responsibility and o	credit worthiness, sp	ecifically pri	ncipal and co	rporate entities, an

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	Ibeg Yoo	Date _	06/14/2016