

DDA Nama		l von manuath an		1 -	N	Winfroy Ento	mariana II.a	
DBA Name		Lynn marathon		Legal Name Tax ID		Winfrey Enterprises IIc		
Type of Business		C store gas sta	tion	1	ax ID	465680117		LLC
Full Business Addre	SS.	101 n main st						
Full Billing Address								
Phone at Location		(317) 341-2987		Best Phone (317)		7) 341-2987	Fax	
Business Email <u>L</u>		Lynnmarathon	Lynnmarathon@yahoo.com		Website			
Years In Business		3	Average Ticke	et		Gross Annual	Sales <u>1,350,000.00</u>	
Do you currently ha	ave cash	advance?	No Wi	th who? _			Balance	
Current Credit Card	sor			_ Average	Processing Vol	ume		
Last Month Vol.	-	#of Tio	ckets		2nd Month Vol.		#of Tickets	
3rd Month Vol.		#of Tio	ckets		4th Month Vol.		#of Tickets	
Owner #1 Name	kicha wi	infrov		Title	Membee			
Date of Birth	090719	-		SSN	312-88-0	732		
Full Home Address		omontory Road		3311		732		
Home Phone			Phone (3	317) 341-2	987 Email	kichak	winfrey@yahoo.com	
			<u>-</u>	•				
Own/Rent	\$ <u>0 Ow</u>	<u>vii</u> 166	ers There 15	u	rivers Lience # {	3970163247	State <u>IN</u>	
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address			_					
Home Phone		Cell	Phone		Email			
Own/Rent	\$	Yea	rs There	D	rivers Lience #		State	
Business Home Bas	sed?	No Locatio	n: Lease/Own	Leased	Lease Ter	m	Monthly Rent	
Landlord / Mortgage		National oil			Cont			,
				Conc				
Contact Phone	-	(260) 824-2220	Cell	_		Email		
Bank Name/Branch			Contact			Phone		
Trade Reference#1			 Contact			Phone		
Trade Reference#2			 Contact			Phone		_
Trade Reference#3			Contact			Phone		
I horoby represent that all	the above	information is true and	inderstand that mak	ing falso sta	tomonts might be see	nsidered fraud. By pr	oviding the above information	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	kisha winfrey	Date	05/11/2017