

DBA Name	Guma Spicy Pies	s, Gumax Cafe	e and Grill Legal Na	ne	Gumax Ir	nternational Ltd		
Type of Business	Manufacturing a	and distribution	on Tax ID		14195220	08	Corp	
Full Business Addre	ess 2862 Garber Way	/ Woodbridge	VA 22192				-	
Full Billing Address								
Phone at Location	(703) 492-4862		Best Pho	ne <u>(609</u>	9) 536-0463	Fax	(888) 944-8629	
Business Email	aguma@gumap	aguma@gumapies.com		Website -		Www.gumapies.com, www.gumaxcafeandgrill.com		
Years In Business	14	Average Tic	cket		Gross Annual Sales <u>1,405,000.00</u>			
Do you currently h	ave cash advance?	No \	With who?			Balance	<u> </u>	
Current Credit Card Processor Average Processing Volume								
Last Month Vol.	#of Tic	kets	2nd Mo	nth Vol.		#of Tick	ets	
3rd Month Vol.	#of Tic	kets	4th Mo	nth Vol.		#of Tick	ets	
Owner #1 Name	Augustine Guma		Title	Ceo				
Date of Birth	08/25/1966		SSN	138-92-5	874			
Full Home Address	16252 Eagle Flight Circle woodbridge va 22191							
Home Phone	(609) 536-0463 Cell	Phone	(609) 536-0463	mail	agı	uma@gumapies.co	m	
Own/Rent	\$ <u>0 Own</u> Yea	rs There 8	Drivers Lie	nce # <u> </u>	B613199428	State	Va	
Owner #2 Name			Title -					
Date of Birth Full Home Address			SSN -					
Home Phone	Cell	Phone		mail				
Own/Rent		rs There	Drivers Lie			State		
Designate Hansa Dans	al2 No Location		lacad lacad	T		Marshlet Dank		
Business Home Base		Lease/Own	<u>Leased</u> <u>Lease</u>	Term		Monthly Rent		
Landlord / Mortgage	Co. <u>Liberia investment</u>	property		Cor	ntact	Ahmet		
Contact Phone	(703) 355-6060	Cell			Email	aaksoylu@a	aksoyluproperties.com	
Bank Name/Branch	TD Bank	Contact	Ms Edwards		Phone			
Trade Reference#1	US Foods	Contact	Keren		Phone			
Trade Reference#2	JR fresh Market	Contact	Joseph rau		Phone			
Trade Reference#3	Westside meats wholesale	- Contact -	Nick		Phone	(609) 889-2700		

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 relating to any of you, to Money Works Direct and to each of the Recipients, on its own behalf.

Signature#1	Printed Name	Augustine Guma	Date	05/24/2017
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