

DBA Name		CTM Indu	stries LLC	Le	egal Name	CTM Industries	LLC	
Type of Business		llc		Ta	ax ID	455458606		LLC
Full Business Addre	SS	98 laddy r	un road rivesville	wv 26588				
Full Billing Address								
Phone at Location (304) 841-5521			L-5521	E	Best Phone (304	) 841-5521	Fax	
Business Email <u>c</u>		ctmindus	tries@gmail.com		Website	ctmindustries.net		
Years In Business		5	Average	Ticket		Gross Annual Sa	ales <u>286,000.00</u>	
Do you currently ha	ave cash a	advance?	No	With who? _			Balance	
Current Credit Card Processor					Average	Processing Volum	ne	
Last Month Vol.			of Tickets		2nd Month Vol.		#of Tickets	
3rd Month Vol.			#of Tickets _		4th Month Vol.		#of Tickets	
Owner #1 Name	Leo thom	as McIntosh		Title	Leo thoma	as McIntosh		
Date of Birth	18081973			SSN	234-19-50	56		
Full Home Address	98 laddy i	run road						
Home Phone	(304) 841	-5521	Cell Phone	(304) 841-5	521 Email	ctmindus	tries@gmail.com	
Own/Rent	\$ <u>0 Own</u>		Years There	<u>11</u> D	rivers Lience # <u>e</u>	598329	State WV	
Owner #2 Name				Title				
Date of Birth				— SSN				
Full Home Address								
Home Phone			Cell Phone		Email			
Own/Rent	\$		— Years There	D	rivers Lience #		State	
Business Home Bas	ed?	Yes L	ocation: Lease/O	wn Owned	Lease Terr	m	Monthly Rent	
Landlord / Mortgage	e Co. <u>w</u>	ells fargo			Conta	act		
Contact Phone	_			Cell		Email		
Bank Name/Branch			Conta	ıct		Phone		
Trade Reference#1 Contact						Phone		
Trade Reference#2			Conta	nct		Phone		
Trade Reference#3			Conta			Phone		
I hereby represent that all	the above in	ormation is tr	ue and understand that	at making false sta	tements might be con	sidered fraud. By provi	ding 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 Na	ame Leo McIntos	h Date	01/13/2018
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