Money	/Works	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Kyle

DPA Nama		MYND Trading LLC		Legal Name M		MYND Trading LLC			
DBA Name Type of Business		1960					473710581	Corp	
Full Business Addre	cc	9 Bonnyview	v Dr		ומג וט		473710301		
Full Billing Address	33	3 Donny view	V DI						
Phone at Location		(973) 727-5	5240		Rest Ph	none (973)	727-5240	Fax	
Business Email		Danielmoakman@gmail.com		om	Website		727 32 10	Tux	
Years In Business		1.5 Average Ticket			VVC	Gross Annual Sales 200,000.00			0,000,00
	ava sash		_ No	_					9,000.00
Do you currently ha			INO	WILLI WITO!					=
Current Credit Card Processor Average Processing Volume									
Last Month Vol.		#o	of Tickets		2nd M	Ionth Vol.		#of Tick	ets
3rd Month Vol.		#of Tickets			4th M	lonth Vol.		#of Tickets	
Owner #1 Name	Eileen Le			Titl		Owner			
Date of Birth	06/04/19			SSI	N	074-76-176	4		
Full Home Address	9 Bonny								
Home Phone	(973) 72	7-5240	Cell Phone	(973) 727-	-5240	Email -	Danielm	noakman@gm	ail.com
Own/Rent	\$ <u>0 Rer</u>	nt	Years There	201 406 4022	Drivers I	Lience #		State	New Jersey
Owner #2 Name				Titl					
Date of Birth Full Home Address				SSI	IN				
Home Phone			Cell Phone			Email			
Own/Rent	\$		Years There	-	Drivers L	-	-	State	
Business Home Bas	ed?	Yes Loc	ation: Lease/C	)wn <u>Lease</u>	d	Lease Term	ı	Monthly	Rent
Landlord / Mortgage	e Co. <u>F</u>	amily				Contac	it .	Eileen Leff	
Contact Phone	<u>(</u>	201) 406-402	2	Cell <u>(</u>	(201) 40	06-4022	_ Email	eileer	nleff@gmail.com
Bank Name/Branch	Bank o	f America	Conta	act			Phone	(973) 740-2	232
Trade Reference#1			 Conta	act			- Phone		
Trade Reference#2			 Conta	act			- Phone		
Trade Reference#3			Conta	act			- Phone		

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	Daniel Oakman	Date	09/29/2016