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

DBA Name		TNT Express I	nc	L6	egal Name	TNT Express Inc	
Type of Business		Logistics and	Tracking	T	ax ID	472363676	Corp
Full Business Addre	SS	231 Timberlake	e Drive, Ewing	NJ 08618			
Full Billing Address							
Phone at Location		(609) 222-9028		E	Best Phone (609	) 222-9028 Fa	x (609) 915-1297
Business Email		tntexpress99acc@gmail.com		<u>n</u>	Website	n/a	
Years In Business		3	Average Ti	icket		Gross Annual Sales	1,919,458.00
Do you currently ha	ave cash a	advance?	No	With who? _			Balance
Current Credit Card	d Processo	or			Average	Processing Volume	
Last Month Vol.		#of 7	Γickets		2nd Month Vol.	#	of Tickets
3rd Month Vol.		#of 7	Tickets		4th Month Vol.	#	of Tickets
Owner #1 Name	Olivera G			Title –			
Date of Birth	10-09-19			SSN –	091-94-61	.27	
Full Home Address		erlake Drive, Ewi					
Home Phone	(609) 222	:-9028 Ce	ell Phone	(609) 222-9	028 Email	tntexpress99a	cc@gmail.com
Own/Rent	\$ <u>0 Own</u>	Y	ears There $\frac{8}{}$	D	rivers Lience # _	Stat	e <u>NJ</u>
Owner #2 Name				Title –			
Date of Birth				SSN —			
Full Home Address							
Home Phone		Ce	ell Phone		Email		
Own/Rent	\$	Y	ears There _	D	rivers Lience # _	Stat	
Business Home Bas	ed?	No Locat	ion: Lease/Ow	n <u>Leased</u>	Lease Teri	mM	onthly Rent
Landlord / Mortgage	e Co				Conta	act	
Contact Phone	_		Ce	ell		Email	
Bank Name/Branch	Bank Of	f America	Contact	any		Phone	
Trade Reference#1			 Contact	:		Phone	
Trade Reference#2	-		 Contact			Phone	
Trade Reference#3			 Contact			Phone	
I horoby roprocont that all	the above in	formation is true on	d understand that	making false sta	tamanta miaht ha aan	sidered fraud. By providing t	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	Olivera Gonevska	Date	06/22/2017
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