

DBA Name		First Source Fo	ods	Le	egal Name	First Source Food	ds, LLC	
Type of Business		Wholesale / Retial Sales		Tax ID		47-3292178		LLC
Full Business Addre	ess	1133 gadwall In	stockbridge ga	30281				
Full Billing Address								
Phone at Location		(404) 974-7130		Best Phone			Fax	
Business Email		firstsourcefoods@gmail.com		Website				
Years In Business		3	Average Tick	et		Gross Annual Sale	es <u>1,200,000.00</u>	
Do you currently h	ave cash	advance?	No W	ith who? _			Balance	
Current Credit Card	d Processo	or			Average	Processing Volume	<u></u>	
Last Month Vol.		#of Ti	ckets		2nd Month Vol.		#of Tickets	
3rd Month Vol.		#of Ti	ckets		4th Month Vol.		#of Tickets	
Owner #1 Name	Chelsea J			Title		100		
Date of Birth	08221989 1930 South columbia place			SSN	592-88-37	03		
Full Home Address			I DI			£:k	for de Orange II com	
Home Phone		(470) 535-8142 Cell Phone		Email firstsourcefoods@gmail.com				
Own/Rent	\$ <u>0 Owr</u>	<u> </u>	ars There	D	rivers Lience # $\frac{0}{2}$	52455921	State <u>Georgia</u>	
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address				33.1				
Home Phone		Cel	I Phone		Email			
Own/Rent	\$	Ye	ars There	D	rivers Lience #		State	
					_			
Business Home Bas	sed?	Yes Location	on: Lease/Own	Owned	Lease Teri	m	Monthly Rent	
Landlord / Mortgage Co. new american funding		nding		Conta	ect			
Contact Phone	_		Cell	_		Email		
Bank Name/Branch			Contact			Phone		
Trade Reference#1			 Contact			Phone		
Trade Reference#2			— Contact			Phone		
Trade Reference#3			Contact			Phone		
I hereby represent that all	the above in	formation is true and	understand that ma	king false sta	tements might be con	sidered fraud. By providi	ng the above information, t	ne 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	Chelsea Johnson	Date	10/08/2018
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