

DBA Name		Cold river consulting corporation				_Legal Name		Cold river consulting corporation			
Type of Business		Financial consulting and marketing				Tax ID		46-4722465	5	Corp	
Full Business Addre	SS	350 fifth	avenue, r	ny, ny 10018							
Full Billing Address											
Phone at Location		(800) 8	21-5870			Best F	hone <u>(610)</u>	329-2663	Fax	(610) 200-5766	
Business Email		Dswir@	aol.com			V	Vebsite				
Years In Business		4		Average Tick	cet _			Gross Annua	l Sales 2	80,000.00	
Do you currently ha	ave cash	advance?		Yes W	ith who?	Rapid metch	advance and ant	d premium	Balar —	nce 5,000 and 1,500	
Current Credit Card Processor						_	Average	Processing Vo	lume		
Last Month Vol.			#of Tick	ets		2nd	Month Vol.		#of Ti	ckets	
3rd Month Vol.			#of Tick	ets		4th	Month Vol.		#of Ti	ckets	
Owner #1 Name	David Sw	virczewski			Tit	lo.	Ceo				
Date of Birth	1019196				SS		143-56-556	57			
Full Home Address			w tripoli, pa	18066	33	· IN					
Home Phone	(610) 329		Cell Pl		(610) 329	-2763	Email	dswir	@aol.com		
Own/Rent	\$ 0 Owr			There 12			_	2772313	State	 Pa	
Ownynenc	\$ 0 OWI			111616 12		Dilveis	Lience # 22	.772313	State	<u>ru</u>	
Owner #2 Name					Tit	le					
Date of Birth					SS	N					
Full Home Address											
Home Phone			Cell Pl	none			Email				
Own/Rent	\$		Years	There		Drivers	Lience #		State		
Business Home Bas	ed?	No	Location:	Lease/Own	Lease	ed .	Lease Term	າ	Month	ly Rent	
Landlord / Mortgage	e Co. <u> </u>	avin i					Conta	ct	Anyone		
Contact Phone	(888) 863	3243	. Cell	-			_ Ema	il		
Bank Name/Branch	Wells fa	argo		Contact	Manag	jer		Phone			
Trade Reference#1	Verizon			Contact				– Phone		_	
Trade Reference#2				Contact	Staple	S		– Phone			
Trade Reference#3				Contact				– Phone			
										ove 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	David Swirczewski	Date	01/04/2018