

DBA Name	Not a DBA		Legal Name	Bradford Insurance Agency LLC	
Type of Business	Independent Insurance Agency		Tax ID	453544110	LLC
Full Business Address	7220 N Lindbergh Blvd #40				
Full Billing Address					
Phone at Location	(314) 830-2048		Best Phone	(314) 830-2048	Fax (314) 830-3942
Business Email	bradfordinsurance@yahoo.com		Website	www.bradford-insurance.net	
Years In Business	9	Average Ticket		Gross Annual Sales	96,000.00
Do you currently have cash advance?	Yes	With who?		Balance	1200.00
Current Credit Card Processor			Average Processing Volume		
Last Month Vol.		#of Tickets		2nd Month Vol.	
3rd Month Vol.		#of Tickets		4th Month Vol.	

Owner #1 Name	Kevin Bradford		Title	Agency Owner	
Date of Birth	01/29/1966		SSN	447-76-6138	
Full Home Address	344 Behlmann Meadows Way Florissant, MO 63034				
Home Phone	(314) 973-4583	Cell Phone	(314) 973-4583	Email	bradfordinsurance@yahoo.com
Own/Rent	\$ 0 Own	Years There	10	Drivers Lience #	T980563943
				State	Missouri
Owner #2 Name			Title		
Date of Birth			SSN		
Full Home Address					
Home Phone		Cell Phone		Email	
Own/Rent	\$	Years There		Drivers Lience #	
				State	

Business Home Based?	No	Location: Lease/Own	Leased	Lease Term	Month to Month	Monthly Rent	100.00
Landlord / Mortgage Co.	Cargo Bay			Contact	Charmelle		
Contact Phone	(314) 656-1440		Cell	(314) 656-1440	Email		

Bank Name/Branch	Arsenal Credit Union	Contact	Amy	Phone	(314) 962-6363
Trade Reference#1	EU-Hodos Enterprises INC	Contact	Keith Johnson	Phone	(314) 304-3997
Trade Reference#2	Kelkat Inc	Contact	Mike Keenoy	Phone	(314) 249-6905
Trade Reference#3	Carpenters Best LLC	Contact	Anthony Speed	Phone	(314) 583-2069

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 pertinent 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 above listed business and business owner/officer (individually and collectively, "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 transaction, including without limitation the application therefor (collectively, "Transaction") 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

Kevin Bradford

Date

05/23/2017