

DBA Name	MMtours		Legal Name	MMtours	
Type of Business	Travel organize		Tax ID	618563363	Sole Prop
Full Business Address	617w 21st street				
Full Billing Address					
Phone at Location	(562) 507-8148		Best Phone	(562) 200-1551	Fax (562) 247-1610
Business Email	mmtours67@gmail.com		Website	Contract to the Casino doing all the website(Valley View Casino)	
Years In Business	9yrs	Average Ticket		Gross Annual Sales	491,000.00
Do you currently have cash advance?	No	With who?		Balance	
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	Miriam Malazarte		Title	Owner	
Date of Birth	10/03/67		SSN	618-56-3363	
Full Home Address	617w 21st st.				
Home Phone	(562) 507-8148	Cell Phone	(562) 507-8148	Email	mmtours67@gmail.com
Own/Rent	\$ 0 Rent	Years There	4yrs	Drivers Lience #	B4969894
				State	California
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?	Yes	Location: Lease/Own	Leased	Lease Term	None as long as we want	Monthly Rent	1,700.00
Landlord / Mortgage Co.	Home owner			Contact			
Contact Phone	(562) 296-7681		Cell		Email		

Bank Name/Branch	Wells Fargo	Contact	Quagin Barba	Phone	(562) 981-5880
Trade Reference#1		Contact	Ester Graf	Phone	(714) 827-5726
Trade Reference#2		Contact	Caroline Viscarra	Phone	(310) 995-7464
Trade Reference#3		Contact	Beth Baquir	Phone	(562) 673-7107

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

Miriam Malazarte

Date

03/08/2017