MoneyWorks Direct ADMINISTRATIVE FORM PLEASE FAX TO: 1.646.4	17.5809
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DBA Name	Your neighbors ro	ofer	Legal I	Name	Your neighbo	ors roofer IIc		
Type of Business	Insurance restora		Eegal i Tax ID		47-4915289		LLC	
Full Business Address	5 councourse pkwy				41-4313203		LLC	
Full Billing Address	5 councourse pkw	y suite sood a	icianta ga					
Phone at Location	(404) 998-2601		Rest	Phone (706)	331-9669	Fax		
Business Email	Emmettjordan83@yahoo.com				Www.yourneighborsroofer.com			
Years In Business	2 Average Tic				Gross Annual Sales 1,000,000.00			
		_						
Do you currently have cash advance? Yes With who? Nugrowth, knights capital Balance 22,000/ 19000								
Current Credit Card Prod	cessor			Average F	Processing Vo	lume		
Last Month Vol.	#of Tick	ets	2nd	Month Vol.		_ #of Tickets _		
3rd Month Vol.	#of Tick	ets	4th	Month Vol.		_ #of Tickets _		
Owner #1 Name Emm	nett Jordan		Title	Owner				
Date of Birth 04-0	7-1982		SSN	258-45-794	19			
Full Home Address P.o.	Box 102 adairsville ga 301	.03						
Home Phone (706	Cell Pl	none (706) 331-9669	Email	emme	ettjordan83@yahoo.com		
Own/Rent \$ 0	Own Years	There <u>706-</u>	331-9669 Driver	s Lience # 0	54281116	State Ga		
Owner #2 Name			Title					
Date of Birth			SSN					
Full Home Address								
Home Phone	Cell Pi	none		Email —				
Own/Rent \$_	Years	There	Drivers	Lience #		State		
Business Home Based? No Location: Lease/Own Leased Lease Term Monthly Rent								
Landlord / Mortgage Co.	Regus			— Contac	ct	Regus		
Contact Phone	(770) 392-3300	Cell			Emai			
		-			_	-		
Bank Name/Branch Priv	ate bank of buckhead	Contact	Charles		Phone –	(404) 264-7979		
Trade Reference#1 Nug	growth	Contact	Nugrowth		Phone –	(845) 920-7578		
Trade Reference#2 Kni	ghts capital	Contact	Knights capit	al	Phone –	(786) 464-8406		
Trade Reference#3		Contact			Phone –			

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	Emmett Jordan	Date	09/21/2016