	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Julian
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DBA Name	san	ne		Le	gal Name	Victory Tra	ctor Implements		
Type of Business	e-commerce retail		Tax ID		83-2247648		LLC		
Full Business Addre	ss <u>65 P</u>	ine Ave., Suite	e 857						
Full Billing Address									
Phone at Location	on (562) 235-5725				Best Phone (562) 235-5725	Fax		
Business Email	sale	sales@etractorimplements.co		om Website		www.etractorimplements.com			
Years In Business	3		Average Tic	ket		Gross Annu	al Sales <u>525,00</u>	0.00	
Do you currently ha	ave cash advar	nce?	No \	With who? _			Balance		
Current Credit Card	l Processor				Average	Average Processing Volume			
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	Uwe Steuernag	el		Title	General M	anager			
Date of Birth	07/04/1943			SSN	7Ap-56-32	:36			
Full Home Address	206 E SHORELI	NE DR							
Home Phone	(562) 235-5725	Cell P	hone	(310) 948-4	829 Email	uwe	@etractorimplements	.com	
Own/Rent	\$ 0 Own	Years	There 4	Dı	rivers Lience # C	1136479	State C	<u> </u>	
Owner #2 Name				Title					
Date of Birth				SSN					
Full Home Address								_	
Home Phone		Cell P			Email				
Own/Rent	\$	Years	There	Dı	rivers Lience #		State		
Business Home Base	ed? No	Location: l	_ease/Own	Leased	Lease Term		Monthly Rent		
Landlord / Mortgage	Co. JIT Tra	nsportation			Conta	act	Daphne Smith		
Contact Phone	(562) 6	96-1177	Cell			Email	daphne@jitt	ransportation.com	
Bank Name/Branch	Bank of Amer	ica	Contact	Eugenia G	Guerra	Phone	(562) 624-4330		
Trade Reference#1	Unishippers		Contact	none		Phone	(877) 224-6712		
Trade Reference#2	Neptune Ship	ping Limited	Contact	Elisa		Phone	(626) 442-8049		
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	Uwe Steuernagel	Date	02/06/2019