MoneyWorks >>	Sales Rep: Julian

DBA Name		jeff rave	en		L	egal N	lame	raven glass			
Type of Business		glass company		т	Tax ID		601299213			Sole Prop	
Full Business Addre	SS	1415									
Full Billing Address											
Phone at Location		(509) 860-1157				Best Phone (509) 663-1383 Fax			(509)	663-8063	
Business Email		jeff@go	jeff@goravenglass.com			Website		www.goravenglass.com			
Years In Business		24		Average Tid	cket _			Gross Annua	Sales 2	285,000.0	0
Do you currently ha	ave cash	advance?		No '	With who?				Balar	nce	
Current Credit Card	d Process	sor				_	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	Melinda	raven			Titl∈ -	9	owner				
Date of Birth	03-22-1				- SSN	1	534-72-683	32			
Full Home Address	306 firc	rest dr cashi	mere wa 9	3815							
Home Phone	(509) 86	50-1157	Cell P	hone	(509) 860-	1157	Email —	jeff@g	oravenglass.	com	
Own/Rent	\$ <u>0 Ow</u>	/n	Years	There 13		Orivers	Lience # ra	venjw370d2	State	WA	
Owner #2 Name					Title -						
Date of Birth					- SSN	I					
Full Home Address											
Home Phone			Cell P				Email —				
Own/Rent	\$		_ Years	There		Drivers	Lience #		State		
Business Home Bas	ed?	No	Location	Lease/Own	Leased	k	_Lease Tern	n 24 mont	hs Month	ly Rent	1,500.00
Landlord / Mortgage	e Co.	north coas	t electric				Conta	ct	Dave		
Contact Phone	-	(509) 679-	7505	_ Ce	II _			_ Emai	I		
Bank Name/Branch	banne	r bank		Contact	morgan	1		Phone	(509) 662	-9221	
Trade Reference#1				Contact				– Phone			
Trade Reference#2				- Contact				– Phone			
Trade Reference#3				Contact				 Phone			
I hereby represent that all	the above	information is	true and un	derstand that m	naking false sta	atement	s might be cons	idered fraud. By n	roviding the ab	ove informat	tion, 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	jeff raven	Date	12/05/2018