MoneyWorks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Steve
The state of the s	Sales Rep: Steve

DBA Name		geeksh	ub		L	egal Name	ges		
Type of Business		gg			T	ax ID	gg		Corp
Full Business Addre	SS	gg							
Full Billing Address									
Phone at Location		(389) 038-0664				Best Phone (389) 858-9395	Fax	(645) 645-6456
Business Email		vecchiotom1@gmail.com				Website	g.g		
Years In Business		56		Average Tick	et _		Gross Annual	Sales	5,000,000.00
Do you currently ha	ave cash	advance?		No W	ith who?			Bala	ance
Current Credit Card	l Process	or				Average	Processing Vol	ume	
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	ges ges				Title	e g			
Date of Birth	112233			-	SSN				
Full Home Address	fffss								
Home Phone	(349) 57	9-3927	Cell P	hone ((222) 234-4	4332 Email	vecchi	otom1@gm	nail.com
Own/Rent	\$ <u>0 Ow</u>	n	Years	There 545	4535 [Drivers Lience # _d	sdd	State	sdfsd
Owner #2 Name					Title				
Date of Birth					SSN	<u> </u>			
Full Home Address Home Phone			Cell P	hono		Email			
Own/Rent	\$			There	г	Drivers Lience #		State	
Ownykent	э								
Business Home Bas	ed?	No	Location	Lease/Own	Leased	Lease Teri	m	Mont	thly Rent
Landlord / Mortgage	e Co. <u> </u>	nghffgfd				Conta	act	gdfdfg	
Contact Phone	<u>(</u>	389) 038-	0664	Cell	<u>(3</u>	321) 211-1111	Email	ve	ecchiotom1@gmail.com
Bank Name/Branch	rdffsds	d		Contact	sdfsdsd	f	Phone	(349) 57	'9-3927
Trade Reference#1	sfdddsf	fdf		Contact	sdsdfdf		 Phone	(349) 57	79-3927
Trade Reference#2	sfdsdf			Contact	sfsdfsdf	f	— Phone	(389) 03	38-0664
Trade Reference#3	ssdfsfs	d		Contact	sfsdfsdf	f	Phone	(389) 03	38-0664
I hereby represent that all	the above ir	nformation is	true and un	derstand that mal	cing false sta	atements might be con	sidered fraud. By pr	oviding the a	above information, 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	ges ges	Date	07/06/2018
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