Money Works Direct ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.58	309
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DBA Name		HB Unlim	nited		l e	gal Name	HB Unlim	ited	
Type of Business Vendor Machine &				Flectrical Su		-	81-29346		Corp
Full Business Addre	ss								ос.р
Full Billing Address				ogo.a o.					
Phone at Location		(860) 53	2-8337		F	Best Phone (86	0) 532-8337	Fax	
Business Email				Gmail.com		Website	.,		
Years In Business		5		verage Ticke	et		Gross Ann	ual Sales 150,000.0	00
Do you currently ha	ave cas	h advance?	 N	o Wit	th who?			Balance	
Current Credit Card	d Proces	ssor			_		e Processing		
Last Month Vol.			- of Ticket#	S		- 2nd Month Vol.		#of Tickets	
3rd Month Vol.			#of Ticket	s		4th Month Vol.		#of Tickets	
Owner #1 Name	Harry E	Bien-Aime			Title	Executive	e VP		
Date of Birth	08/17/1	1971			SSN	070-80-2	627		
Full Home Address	122-16	192 Street Sp	ringField Go	dns NY 11413					
Home Phone	(860) 5	32-8337	Cell Pho	ne		Email	Ha	rryBienAime97@Gmail.con	n
Own/Rent	\$ <u>0 O</u>	wn	Years T	nere 24	D	rivers Lience #	171820940	State NY	
Owner #2 Name					Title				
Date of Birth					SSN				
Full Home Address									
Home Phone			Cell Pho	ne		Email			
Own/Rent	\$		Years T	nere	D	rivers Lience #		State	
Business Home Bas	ed?	Yes L	ocation: L	ease/Own	Owned	Lease Te	rm	Monthly Rent	
Landlord / Mortgage	e Co.	HSBC				Cont	tact		
Contact Phone		(877) 601-7	019	Cell			Er	mail	
Bank Name/Branch	MCU			Contact			Phone	e (212) 693-4900	
Trade Reference#1				Contact			— Phone		
Trade Reference#2				Contact			— Phone	2	
Trade Reference#3				Contact			— Phone	1	
I horoby represent that all	the shows	information is to		rata and that an alci	na folgo stoi	tomonto might be se	ncidored fraud.	Py providing the above informs	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 relating to any of you, to Money Works Direct and to each of the Recipients, on its own behalf.

Signature#1	Printed Name	Harry Bien-Aime	Date	10/02/2016