MoneyWorks >> Direct	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Patrick
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DBA Name	<u> </u>	nuntees		Le	egal Name	inktee			
Type of Business	retail / printing T			ax ID	26-2173493		Coi	rp	
Full Business Address 7317 Santa Monica Blvd West Hollywood CA 90046									
Full Billing Address	_								
Phone at Location	<u>(</u>	(844) 948-6833 E			Best Phone (310) 770-2927	Fax		
Business Email	<u>v</u>	viktor@inktee.net			Website	huntees.com			_
Years In Business	3		Average Tick	cet		Gross Annual S	ales <u>36</u>	0,000.00	
Do you currently h	ave cash adv	vance?	No W	ith who? _			Balanc	e	_
Current Credit Card	d Processor				_ Average	Processing Volu	me _		_
Last Month Vol.		#of Ticl	cets		2nd Month Vol.		#of Tick	ets	
3rd Month Vol.		#of Ticl	cets		4th Month Vol.		#of Tick	cets	_
Owner #1 Name	viktor pelayo)		Title	owner				
Date of Birth	08171976			SSN	621-46-43	350			_
Full Home Address	1035 N. Hay	worth Ave. West	Hollywood CA 9	0046					_
Home Phone	(310) 770-29	927 Cell F	Phone	(310) 770-2	.927 Email	viktor@	nktee.net		_
Own/Rent	\$ 0 Own	Year	s There 12	D	rivers Lience # _E	3538397	State	California	
Owner #2 Name				Title					
Date of Birth				SSN					
Full Home Address									
Home Phone		Cell F	Phone _		Email				
Own/Rent	\$	Year	s There	D	rivers Lience # _		_State		
Business Home Bas	ed? N	o Location	: Lease/Own	Leased	Lease Ter	m	Monthly	Rent	
Landlord / Mortgage	e Co. <u>Insi</u>	gnia			Conta	act _	Lin yit		
Contact Phone	(626	5) 792-7500	_ Cell	_		Email			
Bank Name/Branch	Chase		Contact			Phone			
Trade Reference#1	_		Contact	_		Phone			_
Trade Reference#2			– Contact			Phone			_
Trade Reference#3			– Contact			Phone			_
I hereby represent that all	the above inforr	mation is true and ur	nderstand that ma	king false sta	tements might be cor	sidered fraud. By pro	viding the above	e information, the applican	nt(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	viktor pelayo	Date	08/10/2017