

DBA Name Greenway Crossir			ing Montessori School Legal Name			Greenway Crossing Montessori		
Type of Business childcare/ sch		care/ school	school		Tax ID			Corp
Full Business Addre	ss <u>1325</u>	1325 Greenway Cross Madison Wi. 53713						
Full Billing Address								
Phone at Location	one at Location (608) 274-6475			Best Phone (608		274-6475	Fax	
Business Email greenwaycrossin		nwaycrossing@	ng@hotmail.com		Website		www.greenwaycrossingmontessori.co	
Years In Business	14	A	verage Ticket Gross Annual Sales1,055,		Sales <u>1,055,058.00</u>			
Do you currently ha	ave cash advan	ce? Ye	es Wi	th who? Loa	nme, Expansion Jp	n Capital	Balance \$15,397.9 \$50,000	91
Current Credit Card	l Processor	_			Average F	Processing Volu	ume	
Last Month Vol.		#of Tickets	5	2r	d Month Vol.		#of Tickets	
3rd Month Vol.		#of Tickets	5	4t	h Month Vol.		#of Tickets	
Owner #1 Name	Cynthia Walker			Title	Administrat	tor		
Date of Birth	17/09/1948			SSN 395-54-199				
Full Home Address	725 Bewick Dr. I	ladison Wi. 5371	.4					
Home Phone	(608) 274-6475	ne	Email greenwaycrossing@hotmail.cor					
Own/Rent	\$ <u>0 Own</u>	Years Th	nere 20 ye	ears Drive	rs Lience # W	426-1134-8837-0	State Wisconsin	
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address								
Home Phone		Cell Phor	ne		Email			
Own/Rent	\$	Years Th	nere	Drive	rs Lience #		State	
Business Home Bas	ed? No	Location: Lo	ease/Own	Leased	Lease Term	1	Monthly Rent	
Landlord / Mortgage	e Co. <u>360 Co</u> i	nercial Real St	ate		Contac	ct	Jeann	
Contact Phone	(608) 8	07-0660	Cell	(608	807-0660	_ Email	info@360.com	
Bank Name/Branch	Park Bank Contain		Contact	Ryan Coleman		Phone	(608) 663-5700	
Trade Reference#1			Contact			– Phone		
Trade Reference#2			Contact			– Phone		
Trade Reference#3			Contact			- Phone		
	s application is mad	e or your agents to	investigate my	/our financial re	sponsibility and cr	edit worthiness, sp	oviding the above information, t ecifically principal and corpora	te entities, an

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	Cynthia Walker	Date	10/24/2016
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