

DBA Name		Replay Cafe		Leo		al Name Stephen Hnetir				
Type of Business Restaura			estaurant/Bar		x ID	120840215		Sole Prop		
Full Business Address 15002 Highway 99, Lynnwood, WA 98087										
Full Billing Address										
Phone at Location	ocation (425) 582-8701			B		446-0660	Fax			
Business Email	<u>:</u>	stephen.hnetin	ka@gmail.com	@gmail.com		www.thereplayarcade.com				
Years In Business	2	2	Average Tick	et		Gross Annual Sales 300,000.00)		
Do you currently ha	ve cash ac	dvance?	No Wi	th who? _			Balance			
Current Credit Card Processor					Average	Processing Volu	ıme			
Last Month Vol.		#of Ti	ckets		2nd Month Vol.		#of Tickets			
3rd Month Vol.		#of Ti	ckets		4th Month Vol.		#of Tickets			
Owner #1 Name	Stephen Hr	netinka		Title	Mr					
Date of Birth	02-09-1972	2		SSN	120-84-02	15				
Full Home Address	7028 144th st se, Snohomish, WA 98296									
Home Phone	(425) 446-0660 Cell Phone Email stephen.hnetinka@gmail.com									
Own/Rent	\$ 0 Rent	Ye	ars There 1	Dr	ivers Lience # hr	netisc287ob	State WA			
Owner #2 Name				Title						
Date of Birth				SSN						
Full Home Address										
Home Phone	Cell Phone			Email						
Own/Rent	\$	Ye	ars There	Dr	ivers Lience #		State			
Business Home Base	ed?	No Locatio	on: Lease/Own	Leased	Lease Terr	n	Monthly Rent			
Landlord / Mortgage	Co. Rut	th Martin			Conta	ict				
Contact Phone	(20	06) 390-3632	Cell	_		Email				
Bank Name/Branch	Bank of A Nothgat	America /	Contact			Phone				
Trade Reference#1	Click Dist	tributing	Contact	Patrick I	Мау	— Phone	(406) 890-4413			
Trade Reference#2	2 Crown Distributing Con			Lance		 Phone	(425) 328-0947			
Trade Reference#3			Contact			Phone				

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	Stephen Hnetinka	Date	02/21/2017