

DBA Name		Mike Motors			egal Name	Mike Motors		
Type of Business		salvage yard	l & car sales	Т	ax ID	3204271077	75	Sole Prop
Full Business Addre	SS	9545 New La	redo Hwy.					
Full Billing Address								
Phone at Location		(210) 600-33	306		Best Phone (210	0) 240-4131	Fax	(210) 600-3349
Business Email		mike-motors@outlook.com			Website			
Years In Business	<u>13 y</u>		Average Tid	cket _	Gross Annu		l Sales <u>30</u>	,000.00
Do you currently ha	ave cash	n advance?	No '	With who? _			Balanc	e
Current Credit Card Processor					Average	e Processing Vo	lume _	
Last Month Vol.		#of	Tickets		2nd Month Vol.		#of Tic	kets
3rd Month Vol.		#of	Tickets		4th Month Vol.		_ #of Tic	kets
Owner #1 Name	Marzou	q Abdelrazzaq		Title	e owner			
Date of Birth	062069			- SSN	-	863		
Full Home Address	12926 Lone Star Leaf					003		
Home Phone			Cell Phone	(210) 240-4	4131 Email	marzo	ouqabdelrazzaq	@vahoo com
Own/Rent	\$ 0 Ov		Years There 4		Drivers Lience #		State	TX
Own/Nenc	\$ <u>0 0 0 </u>	VII	Tears There 4		Tivers Lience #	1324333	State	17.
Owner #2 Name				Title	2			
Date of Birth				- SSN				
Full Home Address				-				
Home Phone		(Cell Phone		Email			
Own/Rent	\$		Years There		Drivers Lience #		State	
Business Home Bas	ed?	No Loca	ation: Lease/Own	Leased	l Lease Ter	rm	Monthly	/ Rent
Landlord / Mortgage	 e Co.	Penny Mac			 Cont	act		
Contact Phone		(866) 599-3409) Ce	 II		Ema		
Contact Filone		(000,0000.00		·· <u> </u>				
Bank Name/Branch	Pione	er Bank	Contact	CeCe		Phone	(210) 826-7	7842
Trade Reference#1			Contact			Phone		
Trade Reference#2			Contact			Phone		
Trade Reference#3			Contact			Phone		
I haraby raprocent that all	the above	information is true a	nd understand that m	aking falso sta	tomonto miabt bo ac	nsidered fraud. By r	royiding the above	re 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 relating to any of you, to Money Works Direct and to each of the Recipients, on its own behalf.

Signature#1	Printed Name	marzouq abdelrazzaq	Date	09/07/2019