Sales Rep: Jonathan	MoneyWorks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Jonathan
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DBA Name	NVIS Communica	tions, LLC.	Legal N	ame	NVIS Commu	nications, LLC.	_
Type of Business	Telecommunication	Telecommunications Systems Integration			452477415		LLC
Full Business Address	30130 Knight Ct.						
Full Billing Address							
Phone at Location	(408) 782-8002		Best P	hone <u>(408)</u>	782-8002	Fax	
Business Email	john@nviscom.co	john@nviscom.com		ebsite	www.nviscom.com		
Years In Business	15	Average Ticket			Gross Annual	Sales <u>500,000.00</u>	
Do you currently have ca	sh advance?	No With	n who?			Balance	
Current Credit Card Processor Average Processing Volume							
Last Month Vol.	#of Tick	ets	2nd I	Month Vol.		#of Tickets	
3rd Month Vol.	#of Tick	ets	4th f	Month Vol.		#of Tickets	
Owner #1 Name John I	Rosica		Title	President			
Date of Birth 12/10	0/1963		SSN	133-54-637	74		
Full Home Address 3013	0 Knight Ct.						
Home Phone (408)	782-8002 Cell Pl	none (40	08) 782-8002	Email	john@ı	nviscom.com	
Own/Rent \$ 0	Rent Years	There 3	Drivers	 Lience # <u>c4</u>	167402	State ca	
Owner #2 Name			Title				
Date of Birth			SSN				
Full Home Address Home Phone	Cell Pi	2000		Email			
Own/Rent \$		There	Drivers	Lience #		State	
			DIIVEIS				
Business Home Based? _	No Location:	Lease/Own	Leased	Lease Tern	n	Monthly Rent	
Landlord / Mortgage Co.	Jane Tatum			Conta	ct		
Contact Phone	(619) 400-9546	. Cell			_ Email		
Bank Name/Branch JP M	organ Chase	Contact \	William Powe	rs	Phone	(408) 607-0159	
Trade Reference#1 Barr	ett Communications	Contact J	oe Mauro		Phone	(585) 313-7864	
Trade Reference#2 Talle	ey Communications	Contact J	ohn Corntass	ell	– Phone	(916) 273-1320	
Trade Reference#3 ICON	M America	Contact S	Scott Latta		Phone	(425) 450-6047	

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 ownert/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	John Rosica	Date	02/08/2017