MoneyWorks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Julian

DBA Name		the white oak tavern			Le	_Legal Name			the white oak tavern					
Type of Business		restaur	tant			T	ax ID		4	61952022`				LLC
Full Business Addre	:SS	10030 ba	altimore	national <sub>l</sub>	oike									
Full Billing Address														
Phone at Location	cation (410) 680-8974			!	Best Phone (443			15-0533	Fax					
Business Email	Business Email peter@thewh			niteoaktavern.com			Website		v	www.thewhiteoaktavern.com				
Years In Business		4 Averaç			e Ticket				Gross Annual Sales <u>2,500,000.00</u>			0.00		
Do you currently ha	ave cash	advance?		Yes	Wit	h who? <u>[</u>	Biz2c	redit			Ba	lance <u>1820</u>	00	
Current Credit Card	d Process	or					_	Averag	ge Pro	ocessing Volu	ıme			
Last Month Vol.			#of Ticl	kets			2nd	Month Vo	l		#of	Tickets		
3rd Month Vol.			#of Tick	kets .			4th	Month Vol	l		#of	Tickets		
Owner #1 Name	peter fre	У				Title	<u>.</u>	owner						
Date of Birth	05/09/19	185			<u> </u>	SSN		213-31-	9730					
Full Home Address	9541 joe	y drive												
Home Phone	(443) 91	5-0533	Cell F	Phone				Email		peter@	thewhited	oaktavern.co	m	
Own/Rent	\$ <u>0 Ow</u>	n	 Year	s There	5	D	rivers	Lience #	f6006	680603354	State	mary	land	
Owner #2 Name	noel johr	nson				Title	2	owner						
Date of Birth						SSN		219-11-	9324					
Full Home Address	6445 bel	leview driv	e											
Home Phone			Cell F	hone				Email						
Own/Rent	\$ Own		Year	s There	10	D	rivers	Lience #	j5256	536115962	State	mary	land	
Business Home Bas	sed?	No	Location	: Lease/0	Own	Leased		_Lease Te	erm	7 years	Mor	nthly Rent	16,000.0	0
Landlord / Mortgage	e Co. <u>k</u>	timco						Con	ntact					
Contact Phone	_			_	Cell	_				Email	_			
Bank Name/Branch				Cont	act					Phone				
Trade Reference#1				Cont	act					Phone				
Trade Reference#2				_ Cont	act					Phone				
Trade Reference#3				– Cont	act -					Phone				
I hereby represent that all	the above ir	nformation is	true and u	nderstand th	nat makir	ng false sta	temen	ts might be c	onside	red fraud. By pro	viding the	above informa	tion, the appli	cant(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	peter frey	Date	10/26/2017
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