

DBA Name		Rjexpress ma	rt	Le	egal Name	Farhat & associa	etes	
Type of Business		Gas station c		Tax ID		461443367		Corp
Full Business Addre	ess	1495 hwy 490						_
Full Billing Address								
Phone at Location		(318) 379-88	86		Best Phone (318)) 623-8874	Fax	(318) 379-8886
Business Email		Samisfarhat@						
Years In Business		15	Average Tic	ket		Gross Annual Sal	les <u>14</u>	,500,000.00
Do you currently h	ave cash a	advance?	No V	Vith who? _			Balanc	e
Current Credit Card Processor		or			Average	Processing Volum	e _	
Last Month Vol.		#of -	Tickets		2nd Month Vol.		#of Ticl	kets
3rd Month Vol.		#of ⁻	Tickets		4th Month Vol.		#of Ticl	kets
Owner #1 Name	Sami Farh	nat		Title	Owner			
Date of Birth	08051968	08051968		SSN	562-75-92	91		
Full Home Address	5427 bay	ou crossing						
Home Phone	(318) 379	-8883 C	ell Phone -	(318) 623-8	8874 Email	samisfarh	at@yahoo.d	com
Own/Rent	\$ <u>0 Own</u>	Y	ears There 318	86238874	Privers Lience # 0	10837508	State	Louisiana
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address								
Home Phone		C	ell Phone -		Email			
Own/Rent	\$	Y	ears There	D	Privers Lience #		State	
Business Home Bas	sed?	No Locat	ion: Lease/Own	Leased	Lease Terr	m	Monthly	Rent
Landlord / Mortgage	e Co. <u>Ji</u>	mmy allen			Conta	act		
Contact Phone	_		Cell	_		Email		
Bank Name/Branch	Evangel	ine bank	Contact	318443	3700	Phone		
Trade Reference#1 Us Food		Contact	769777	6500	Phone			
Trade Reference#2 Coca cola		Contact	318445	5555	Phone			
Trade Reference#3	Imerial	trading	Contact	180074	31761	Phone		
I horoby roprosont that all	the above in	formation is true an	d understand that ma	aking falso sta	stamants might ha can	sidered fraud. By provid	ling the show	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 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 Sami Farha	at Date	09/14/2017
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