Money Works Direct ADMINISTRATIVE FORM PLEASE FAX TO: 1.646	.417.5809
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DBA Name						gal Name	_	4 Robinson & Son's Haul		
Type of Business		Trucking		Ta:	x ID	8	320944124		LLC	
Full Business Addre	SS	3212 Pico	colo Drive							
Full Billing Address										
Phone at Location	(804) 329-1116			В	Best Phone (804) 497-0604 Fax					
Business Email						Website	_			
Years In Business	ars In Business		2 Average Ticket			G		Gross Annual Sales 90,000.00		00
Do you currently ha	ave cash	advance?	No	With w	ho? _				Balance	
Current Credit Card Processor						Aver	age Pro	ocessing Volum	ne	
Last Month Vol.			#of Tickets			2nd Month \	/ol.		#of Tickets	
3rd Month Vol.			#of Tickets			4th Month \	ol		#of Tickets	
O	D. alasa I				T'	0				
Owner #1 Name	Desiree J				Title	Owne				
Date of Birth	01/26/19				SSN		9-1410			
Full Home Address		colo Drive	Call Disass	(004)	407.00	204 5		**************		
Home Phone	(804) 497		Cell Phone		497-06			-	university@gmail.	com
Own/Rent	\$ <u>0 Owr</u>	1	Years There	8 years	Dr	ivers Lience #	A642	213979	State <u>Va</u>	
Owner #2 Name					Title					
Date of Birth					SSN					
Full Home Address										
Home Phone			Cell Phone			Email				
Own/Rent	\$		Years There		Dr	ivers Lience #	<u> </u>		State	
Desciones Harris Bar	12	Na	ti	2	اء ما	1	T		Manthelia Dant	675.00
Business Home Bas	ea?	No	Location: Lease/0	Jwn <u>Ol</u>	vned	Lease	ıerm		Monthly Rent	675.00
Landlord / Mortgage	e Co. <u>V</u>	Vellsfargo				С	ontact	_		
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 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	Desiree Jones	Date	05/22/2018