M oney∀	Vorks 🕽	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Adrian

DBA Name		ADA USA	1		Legal I	Name	Audio Design	Associates,	Inc.
Type of Business		Manufacturing		— Tax ID	1	13-2902370		Corp	
Full Business Addre	ess	6 Executiv	ve Plaza, Ste. 14	.7					
Full Billing Address									
Phone at Location		(914) 946-9595			Best Phone (914) 946-		946-9595	Fax	(914) 946-9620
Business Email		richard@ada-usa.com			Website		www.ada-usa.com		
Years In Business		42 Average Ticket					Gross Annual S	00,000.00	
Do you currently h	ave cash	advance?	No	With wh	o?			Balan	ce
Current Credit Card	d Process	or				Average F	Processing Volu	me	
Last Month Vol.	-		#of Tickets		2nd	Month Vol.		#of Ti	ckets
3rd Month Vol.			#of Tickets		4th	Month Vol.		#of Ti	ckets
Owner #1 Name	Richard S	Stoerger		-	Title	President &	: CEO		
Date of Birth	17-05-19	961		 -	SSN	124-42-247	6		
Full Home Address	1185 We	ave Street							
Home Phone	(914) 44	7-3624	Cell Phone	(914) 4	47-3624	Email	richard(@ada-usa.co	m
Own/Rent	\$ <u>0 Ow</u>	n	Years There	22	Driver	 s Lience # <u>25</u>	6758042	State	NY
Owner #2 Name					Title				
Date of Birth					SSN				
Full Home Address					JJ11				
Home Phone			Cell Phone			Email			
Own/Rent	\$		Years There		Driver:	Lience #		State	
Business Home Bas	sed?	No I	_ocation: Lease/	Own Lea	sed	Lease Term	1	Month	ly Rent
 Landlord / Mortgag		Mac-Calli				— Contac			
Contact Phone	_			Cell			_ Email		
Bank Name/Branch	Chase		Cont	tact			Phone		
Trade Reference#1			Cont	tact			Phone		
Trade Reference#2			Conf	tact			- Phone		
Trade Reference#3			Cont	tact			- 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	Richard Stoerger	Date	08/29/2019