

DBA Name	s	andbar		l c	gal Name	٥	vster Point \	/entures	Inc	
Type of Business		Restaurant			Tax ID		Oyster Point Ventures Inc 56-2324973		iiic	Corp
Full Business Addre	_	86 J. Clyde Morri	ic Blvd		א וט		3-232-373			Согр
Full Billing Address	55 75	o j. Ciyde Morri	is bivu.							
Phone at Location	- (757) 599-8411			Best Phone (7	57) 81	7-3161	Fax	(757)	599-6905
_		mv99999@hoti	mail com	Website			sandbarpub.com		(131)	333 0303
Years In Business	13 Average Ti					_				00
			_		Swift Capital	, GIV	oss Ailiuui		1,100,000	
Do you currently ha		/ance?	Yes W	vith who?				-	ance <u>4312.</u>	34
Current Credit Card Processor Average Processing Volume										
Last Month Vol.		#of Tick	cets		2nd Month Vo	ol		#of	Tickets	
3rd Month Vol.		#of Tick	kets		4th Month Vo	ol		#of	Tickets	
Owner #1 Name	Gary Vaughr	ı		Title	Preside	ent				
Date of Birth	6/24/1966			SSN	229-33	3-2791				
Full Home Address	210 Granville	e Dr.								
Home Phone	(757) 817-31	L61 Cell F	Phone -	(757) 817-3	161 Email		gmv99	999@hotn	nail.com	
Own/Rent	\$ <u>0 Own</u>	Year	s There 13	D	rivers Lience #	E2463	37664	State	VA	
Owner #2 Name				Title						
Date of Birth				SSN						
Full Home Address										
Home Phone		Cell F	Phone -		Email					
Own/Rent	\$	Year	s There	D	rivers Lience #			State		
Business Home Bas	ed? N	o Location	: Lease/Own	Owned	Lease T	erm		Mon	thly Rent	
		Location	. Lease, own	Owned					city recit	
Landlord / Mortgage	e Co				Co	ntact				
Contact Phone			_ Cell	_			Email	_		
Bank Name/Branch	BB&T		Contact				Phone	(800) 22	26-5228	
Trade Reference#1	Tri-Cities		– Contact				Phone	(757) 8	74-6600	
Trade Reference#2	Riverside F	Paper	– Contact	Annetta			Phone	(757) 24	49-3312	
Trade Reference#3	Reinhart		– Contact	Kristen I	Daugherty		Phone	(757) 53	38-8000	

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	Gary Vaughn	Date	01/18/2017
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