

DBA Name		Skema Courier		Le	gal Name	Skema Courier		
Type of Business		Transportation		Tax ID		26=183467	5	Corp
Full Business Addres	SS	370 WILLIAM F M	C CLELLAN H	WY				
Full Billing Address								
Phone at Location	n (617) 567-0681			Best Phone			Fax	(617) 561-6316
Business Email	lg@skemacourier.com			Website		www.skemacourier.com		
Years In Business		10	Average Tic	ket		Gross Annua	l Sales <u>4</u>	,300,000.00
Do you currently hav	ve cash a	advance?	No \	With who? _			Balan	nce
Current Credit Card Processor					Average	Processing Vo	lume	
Last Month Vol. #of Tick			kets		2nd Month Vol.	#of Tickets		
3rd Month Vol.		#of Tic	kets		4th Month Vol.		_ #of Ti	ckets
Owner #1 Name	LUCIANO	GONCALVES		Title	President			
– Date of Birth	04/19/1972			SSN	343-96-97	47		
Full Home Address	18 william	ns st		-	-			
Home Phone	(617) 567	-0681 Cell	Phone		Email	lg@sk	cemacourier.co	om
Own/Rent	\$ <u>0 Own</u> Year		rs There		rivers Lience #		State	
Owner #2 Name				Title				
Date of Birth				SSN.				
Full Home Address								
Home Phone	Cell Phone		Phone	Email				
Own/Rent	\$	Yea	rs There	D	rivers Lience #		State	
Business Home Base	ed?	No Locatio	n: Lease/Own	Leased	Lease Terr	n	Month	ly Rent
Landlord / Mortgage	Co. G	rossman CO			Conta	ct	Donna	
Contact Phone	(6	517) 657-0063	Cel	II		Emai	il	
Bank Name/Branch Bank of AMerica Co			Contact			Phone	(781) 485	-0447
Trade Reference#1	Sunoco Gas station		Contact	Larry		Phone	(781) 589	-1260
Trade Reference#2	Di silva transportation		Contact	Matt		 Phone	(617) 887	-1300
Trade Reference#3	Sign2go	4	Contact	Lucio		Phone	(617) 389	-7070

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	LUCIANO GONCALVES	Date	03/01/2019
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