

DBA Name	Art Aspects	Legal Name	Boyd & Fleuriel, Ltd.	
Type of Business	Retail	Tax ID	56-2110688	Corp
Full Business Address	701 S. Sharon Amity Rd., Ste. A			
Full Billing Address				
Phone at Location	(704) 442-8240	Best Phone	(704) 661-0956	Fax (704) 442-8242
Business Email	mark.boyd@artaspects.biz	Website	www.artaspects.biz	
Years In Business	20	Average Ticket	Gross Annual Sales	750,000.00
Do you currently have cash advance?	Yes	With who?	Wide Merchant, High Speed Capital	Balance 8000, 5000
Current Credit Card Processor	Average Processing Volume			
Last Month Vol.	#of Tickets	2nd Month Vol.	#of Tickets	
3rd Month Vol.	#of Tickets	4th Month Vol.	#of Tickets	

Owner #1 Name	Mark Boyd	Title	President
Date of Birth	06-18-1958	SSN	280-58-7553
Full Home Address	5924 Portburn Rd.		
Home Phone	(704) 661-0956	Cell Phone	(704) 661-0956 Email mark.boyd@artaspects.biz
Own/Rent	\$ 0 Own	Years There	15 Drivers Lience # 5187691 State NC
Owner #2 Name		Title	
Date of Birth		SSN	
Full Home Address			
Home Phone		Cell Phone	Email
Own/Rent	\$	Years There	Drivers Lience # State

Business Home Based?	No	Location: Lease/Own	Leased	Lease Term	Monthly Rent
Landlord / Mortgage Co.	Sam Kleto		Contact	Sam Kleto	
Contact Phone	(704) 377-4614	Cell	Email		

Bank Name/Branch	First Citizens Bank	Contact	Jeff Collins	Phone	(704) 338-3984
Trade Reference#1	Larson Juhl	Contact	Suzanne	Phone	(800) 833-0218
Trade Reference#2	ProKase	Contact	Bruce	Phone	(800) 486-6693
Trade Reference#3	Nielsen Bainbridge	Contact	Kim	Phone	(533) 684-4454

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 pertinent 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 above listed business and business owner/officer (individually and collectively, "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 transaction, including without limitation the application therefor (collectively, "Transaction") 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	Mark Boyd	Date	03/05/2018
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