MoneyWorks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Jonathan
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DBA Name		8707 Tioga Pass Helotes, Tex 78023-4388		exas	Legal Name		8707 Tioga P	8707 Tioga Pass Helotes, Texas 7802		388
Type of Business		Service			Tax ID		42-1602788		_	Corp
Full Business Addre	:SS	8707 Tio	oga Pass							
Full Billing Address										
Phone at Location		(210) 3	72-9493		Best Ph	none <u>(210</u>)) 372-9493	Fax		
Business Email		frankalderman@sbcglobal.ne		net	et Website		www.gasservicecorp			
Years In Business		14	Average 1	Ticket			Gross Annual S	Sales <u>300</u>	,000.00	
Do you currently ha	ave cash a	advance?	No	With who?				Balance	2	
Current Credit Card Processor Average Processing Volume										
Last Month Vol.			#of Tickets		2nd M	onth Vol.		#of Tick	ets	
3rd Month Vol.			#of Tickets		4th M	lonth Vol.		#of Tick	ets	
O #1 No	Frank K A	1 1 2 11 12 12 12		T1	1.	Dunnislant				
Owner #1 Name	Frank K A			Tit		President				
Date of Birth Full Home Address	24/03/195 8707 Tiog			SS	OIN	451-08-68	520			
Home Phone	(210) 372		Cell Phone	(210) 372	-9493	Email	frankalı	derman@sbcgl	ohal net	
Own/Rent	\$ 0 Own			210-336-649		-	09962525	State	TX	
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Owner #2 Name				Tit	:le					
Date of Birth				 SS	SN					
Full Home Address										
Home Phone			Cell Phone			Email				
Own/Rent	\$		Years There		Drivers L	ience #		State		
Business Home Bas	sed?	Yes	Location: Lease/Ov	vn <u>Own</u> e	ed	Lease Ter	m	Monthly	Rent	
Landlord / Mortgage	e Co					Cont	act			
Contact Phone	_			Cell			Email			
Bank Name/Branch			Contac	ct			Phone			
Trade Reference#1			Contac	ct			Phone			
Trade Reference#2			Contac				— Phone			
Trade Reference#3			Contac	ct			Phone			
I haraby rangeant that all	the above in	formation is	true and understand that	t making false :	+-+	maiaht ha sas	saidared froud. Dy pre	uiding the shoul	information the or	anlicant(s)

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	Frank Alderman	Date	09/18/2017