MoneyWorks >> Dir	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Mike
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DBA Name		Tasty E	Bakery			Le	egal N	lame		Tasty	Bakery	′			
Type of Business	Bakery				Tax ID				<u>:</u>	26080	2171			_	Sole Prop
Full Business Addre	ess	16 NE C	Court Sq.												
Full Billing Address															
Phone at Location		(336) 2	227-7448				Best I	Phone (3	36) 2	27-74	48	Fax			
Business Email	tastybakery@att.net				Website										
Years In Business	58 Avera			Average	rage Ticket						Gross Annual Sales 20,0			00.00	
Do you currently h	ave cash	advance	?	No	Wit	h who? _						_ Ba	alance		
Current Credit Card	d Processo	or					_	Avera	ge Pr	ocess	ing Vol	ume	_		
Last Month Vol.			#of Tick	ets _			2nd	Month Vo	ol.			_ #o	f Tick	ets _	
3rd Month Vol.	#of Tickets			ets _	4th Month Vol.				ol.	#of Tickets					
Owner #1 Name	Paul Hard	len				Title		Owner							
Date of Birth	11 /29/61	-				SSN		238-25-	-3952						
Full Home Address	64-68 So	uth preac	her Roberts	on Road G	 Graham	North Ca	rolina	27253							
Home Phone	(336) 227	7-7448	Cell P	hone	(3	36) 227-7	448	Email			tastyb	akery@at	t.net		
Own/Rent	\$ <u>0 Owr</u>	Ì	Years	s There	20o	D	rivers	Lience #	551	3099		State		North Ca	arolina
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 Bas	sed?	No	_Location	: Lease/C)wn	Leased		_Lease T	erm	_		Mo	nthly	Rent _	
Landlord / Mortgage	e Co.							Cor	ntact	:		Court S Group	Square	Develo	oment
Contact Phone	<u>(3</u>	336) 229	-4225	_	Cell	<u>(3</u>	36) 2	229-4225			Email	_			
Bank Name/Branch				Conta	act					Ph	one				
Trade Reference#1				– Conta	act .					Ph	one				
Trade Reference#2				– Conta	act					Ph	one				
Trade Reference#3				– Conta	act					Ph	one				
I hereby represent that all authorize you to whom thi will provide financial state authorize Money Works Di	s application ements, tax	n is made o returns, etc	r your agent c. as you dee	s to investion	gate my ry. A ph	our financi otocopy of	al resp this au	onsibility an Ithorization	nd cred will be	lit worth deeme	iness, sp d as acc	ecifically periods of the contract of the cont	principa r releas	I and corpo e of credit	orate entities, and information. I/We

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 relating to any of you, to Money Works Direct and to each of the Recipients, on its own behalf.

Signature#1	Printed Name	Paul Harden	Date	01/22/2020