

DBA Name		Brogoitti Ranch	es Inc	l ena	al Name	Brogoitti Rar	nches Inc	
Type of Business		Farming		Tax ID		930801708		Corp
Full Business Address		79308 Helix Hwy				330001700		COIP
Full Billing Address	.55	75500 Helix HW	<u>'</u>					
Phone at Location		(541) 969-3215		Bes	Best Phone (541) 969-3215 Fax			
Business Email		bbranch52@hotmail.com		Website				
Years In Business		37	Average Tick			Gross Annual Sales 850,000.00		
Do you currently h	ave cash	advance?	No W	ith who?			Balance	
Current Credit Card Processor					Average P	rocessing Vo	lume	
Last Month Vol. #of Tick		kets	2	nd Month Vol.		#of Tickets		
3rd Month Vol.		#of Tic	kets	4	th Month Vol.		#of Tickets	
Owner #1 Name	Bruce Bro	ogoitti		Title	Owner			
Date of Birth	0418195	1		SSN	533-60-5601	1		
Full Home Address	79308 He	79308 Helix Hwy						
Home Phone	(541) 969	9-3215 Cell	Phone (541) 969-321	5 Email	bbran	ch52@hotmail.com	
Own/Rent	\$ <u>0 Owr</u>	n Yea	rs There 20 y	rs Driv	ers Lience # 128	36213	State Oregon	
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address								
Home Phone			Phone		Email			
Own/Rent	\$ Own	Yea	rs There	Driv	ers Lience #		State	
Business Home Bas	sed?	No Locatio	n: Lease/Own	Owned	Lease Term		Monthly Rent	
Landlord / Mortgag	e Co. <u>N</u>	I/A			Contact	t	N/A	
Contact Phone	_		Cell			. Emai	I	
Bank Name/Branch	Bank of	f the West	Contact	Gennia		Phone	(541) 276-0334	
Trade Reference#1 MIDCO		— Contact	Brian		Phone	(541) 278-5015		
Trade Reference#2 MOuntain Hi			— Contact	Darin		Phone	(509) 529-7647	
Trade Reference#3	CPS		— Contact	Dean		Phone	(541) 566-3533	

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	Bruce Brogoitti	Date	05/22/2019
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