MoneyWorks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Julian
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DBA Name Don h johnson Legal Name Don h johnson Type of Business Insurance Tax ID 331170153 Corp Full Business Address 1559 university blvd w Full Billing Address Phone at Location (904) 536-4461 Best Phone Website Years In Business I1 Average Ticket Gross Annual Sales 250,000.00 Do you currently have cash advance? No With who? Balance Current Credit Card Processor Average Processing Volume Last Month Vol. #of Tickets 4th Month Vol. #of Tickets 3rd Month Vol. #of Tickets 4th Month Vol. #of Tickets
Full Business Address Full Billing Address Phone at Location (904) 536-4461 Best Phone Business Email Website Years In Business 11 Average Ticket Gross Annual Sales 250,000.00 Do you currently have cash advance? No With who? Balance Current Credit Card Processor Average Processing Volume Last Month Vol. #of Tickets 2nd Month Vol. #of Tickets
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Business Email Years In Business 11
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Current Credit Card Processor Average Processing Volume Last Month Vol #of Tickets 2nd Month Vol #of Tickets
Last Month Vol. #of Tickets 2nd Month Vol. #of Tickets #of Tickets
3rd Month Vol #of Tickets 4th Month Vol #of Tickets
Owner #1 Name Don Johnson Title Pres
Owner #1 Name Don Johnson Title Pres Date of Birth 04-14-1973 SSN 408-55-2942
Full Home Address 12522 turnberry dr jacksonville fl 32225
Home Phone (904) 536-4461 Cell Phone Email donj@gmail.com
Own/Rent \$ 0 Own Years There 5 Drivers Lience # J525188731340 State
Own/Refit 5 Drivers Elefice # 1929100791940 State
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. Contact
Contact Phone Cell Email
Bank Name/Branch Bbva compass Contact Chris Phone (904) 564-8202
Trade Reference#1 Contact Phone
Trade Reference#2 Contact Phone
Trade Reference#3 Contact Phone

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	Don Johnson	Date	01/03/2018