

DBA Name		Restoration Performance Modification Le			gal Name	Restoration P	Restoration Performance Modification		
Type of Business		automotive		Tax ID		262351228		Sole Prop	
Full Business Addre	SS	3597 Nevada S	t Unit D						
Full Billing Address									
Phone at Location		(925) 485-1430		В	Best Phone	_	Fax		
Business Email		therpmshop@gmail.com			Website	therpmshop.com			
Years In Business		9	Average Tick	cet		Gross Annual	Sales <u>400,000</u> .	00	
Do you currently ha	ave cash a	advance?	Yes W	ith who? C	AN		Balance 3300)	
Current Credit Card Processo		or			Average	Processing Vol	ume		
Last Month Vol.		#of T	ckets		2nd Month Vol.		#of Tickets		
3rd Month Vol.		#of T	ckets		4th Month Vol.		#of Tickets		
Owner #1 Name	Casey Do	bbeck		Title	owner				
Date of Birth	02/21/198	36		SSN	621-24-75	59			
Full Home Address	2713 Bolli	inger Canyon Rd S	an Ramon, CA 94	583					
Home Phone	(925) 485	-1430 Ce	l Phone		Email	therpm	nshop@gmail.com		
Own/Rent	\$ 0 Rent	 :Ye	ars There 3	Dr	ivers Lience # d	3713237	State ca		
Owner #2 Name				Title					
Date of Birth				SSN					
Full Home Address									
Home Phone		Ce	l Phone _		Email				
Own/Rent	\$	Ye	ars There	Dr	ivers Lience #		State		
Business Home Bas	ed?	No Locati	on: Lease/Own	Leased	Lease Terr	m <u>5 years</u>	Monthly Rent	5,049.00	
Landlord / Mortgage	e Co. Bo	eratlis Propertie	S		Conta	act	Chris Beratlis		
Contact Phone	<u>(9</u>	925) 876-4283	Cell			Email			
Bank Name/Branch			Contact			Phone			
Trade Reference#1	_		 Contact	_		Phone			
Trade Reference#2			— Contact			— Phone			
Trade Reference#3			Contact			Phone			
I hereby represent that all	the above inf	formation is true and	understand that ma	king false state	ements might be con:	sidered fraud. By pr	oviding the above inform	ation, the applicant(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 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	Casey Dobbeck	Date	12/26/2017