MoneyWorks >> Direct	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Patrick
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		DI C : 1						
DBA Name		Pho Sriracha	inc		gal Name	pho sriracha		
Type of Business		restaurant			ix ID	47-2592096		Corp
Full Business Address 301 w channel islands blvd,Port Hueneme,Ca 93041								
Full Billing Address								
Phone at Location		(805) 985-00)76	B	Best Phone (805) 985-0076	Fax	
Business Email		phosriracha(@gmail.com		Website			
Years In Business		1.8	Average Tick	et		Gross Annual	Sales <u>280,000</u> .	00
Do you currently h	ave cash	advance?	No W	ith who? _			Balance	
Current Credit Card	d Process	sor			Average	Processing Vol	ume	
Last Month Vol.		#of	Tickets		2nd Month Vol.		#of Tickets	
3rd Month Vol.		#of	Tickets		4th Month Vol.		#of Tickets	
Owner #1 Name	phong n	guyen		Title	ceo			
Date of Birth	06/06/19			SSN	605-90-85	20		
Full Home Address		h Pl, Oxnard, Ca	93035					
Home Phone	(805) 98	5-0076 (Cell Phone –		Email	phosrir	acha@gmail.com	
Own/Rent	\$ <u>0 Ow</u>	n ·	Years There 5	Dr	rivers Lience # b	8633360	StateCalfo	ornia
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address								
Home Phone		(Cell Phone –		Email			
Own/Rent	\$		Years There	Dr	rivers Lience #		State	
Business Home Bas	ed?	No Loca	tion: Lease/Own	Leased	Lease Terr	n	Monthly Rent	3,500.00
Landlord / Mortgag	e Co. <u> </u>	Mercado Via Ma	ar		Conta	ict	Mr Paul	
Contact Phone	<u>.</u>	(805) 290-0112	Cell	(8)	05) 290-0012	Email		
Bank Name/Branch	Citi Ba	nk	Contact			Phone	(805) 204-3016	
Trade Reference#1			Contact			— Phone		
Trade Reference#2			 Contact			— Phone		
Trade Reference#3			Contact			— Phone		
I hereby represent that all	the above i	nformation is true a	nd understand that mal	king false stat	rements might be con-	sidered fraud. By nr	oviding the above informa	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 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	phong nguyen	Date	06/20/2017