<b>Money</b> Works	Direct	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Alexis
		Suics Rep. Alexis

DBA Name	Retreats Unlimited				Legal Name		Retreats Unlimited			
Type of Business	Marketing			Tax ID		473395636			Corp	
Full Business Addre	SS	3 Sandstone Ct			_				_	
Full Billing Address	•									
Phone at Location	(312) 961-3280			Best Phone			Fax			
Business Email		tammy@myretreatsunlimit		ted.com Website		myretreatsunlimited.com				
Years In Business	<u>-</u>	20	Average	Ticket Gross		Gross Annual Sa	les <u>1</u> 7	5,000.00		
Do you currently ha	ave cash a	dvance?	Yes	With who	? Yellov	v Stone Capit	cal	Balanc	e <u>13,000</u>	
Current Credit Card	d Processo	r				Average	Processing Volum	ie _		
Last Month Vol.		#of T	ickets		2nd	Month Vol.		#of Ticl	cets	
3rd Month Vol.		#of T	ickets		_ 4th	Month Vol.		#of Ticl	cets	
Owner #1 Name	Tammy Pe	etersen		T	Title	President				
Date of Birth	12/18/196	6			SSN	347-68-186	58			
Full Home Address	3 Sandsto	ne Ct. South Elgir	n, IL 60177							
Home Phone	(312) 961-	-3280 Ce	ll Phone	(312) 96	51-3280	Email	tammy@r	myretreatsu	nlimited.com	
Own/Rent	\$ <u>0 Own</u>	Ye	ars There	312-961-32	80 Driver	s Lience # _		_State	IL	_
Owner #2 Name				7	Title					
				<del></del>	SSN					
Date of Birth Full Home Address				`	DOIN					
Home Phone			II Phone			Email				
					Dulina	_		Chaha		
Own/Rent	\$	Ye	ars There	-	Drivers	Lience #		State		
Business Home Bas	ed?	YesLocati	on: Lease/0	Own <u>Leas</u>	sed	_Lease Tern	n	Monthly	Rent	
Landlord / Mortgage	e Co				_	Conta	ct _			
Contact Phone				Cell			_ Email			
Bank Name/Branch			Cont	act			Phone			
Trade Reference#1			 Cont	act			Phone			_
Trade Reference#2			 Cont	act			Phone			
Trade Reference#3			Cont	act			Phone			
I hereby represent that all	the above infe	ormation is true and	understand th	nat making false	e statemen	ts might be cons	idered fraud. By provid	ding the abov	e information, 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	Tammy Petersen	Date	05/03/2017
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