

DBA Name	Charlotte Monroe Air Center		Legal Name	11/2010	
Type of Business	Aircraft maintenance		Tax ID	30-0728184	Corp
Full Business Address	1650 Aviation Drive				
Full Billing Address					
Phone at Location	(704) 975-8950		Best Phone	(704) 975-8950	Fax
Business Email	mike@charmonaircenter.com		Website	www.charmonaircenter.com	
Years In Business	7	Average Ticket		Gross Annual Sales	500,000.00
Do you currently have cash advance?	Yes	With who?	Strategic Funding, SOS Capital, Forward Financing		Balance \$28,000
Current Credit Card Processor			Average Processing Volume		
Last Month Vol.		#of Tickets		2nd Month Vol.	
					#of Tickets
3rd Month Vol.		#of Tickets		4th Month Vol.	
					#of Tickets

<b>Owner #1 Name</b>	Michael Dockery		Title	CEO	
Date of Birth	09-08-1958		SSN	263--3-4549	
Full Home Address	3532 Sadler Road				
Home Phone	(704) 906-5556	Cell Phone	(704) 906-5556	Email	michaellukse@aol.com
Own/Rent	\$ 0 Rent	Years There	15	Drivers Lience #	6205652
				State	NC
<b>Owner #2 Name</b>			Title		
Date of Birth			SSN	--	
Full Home Address					
Home Phone		Cell Phone		Email	
Own/Rent	\$ Own	Years There		Drivers Lience #	
				State	

Business Home Based?	No	Location: Lease/Own	Leased	Lease Term	Monthly Rent
Landlord / Mortgage Co.	City of Monroe		Contact	Accts Receivable	
Contact Phone	(704) 226-2300	Cell		Email	

Bank Name/Branch	First Citizens Bank	Contact		Phone	
Trade Reference#1	Commander Instrument	Contact	Accts Rec	Phone	(704) 395-1417
Trade Reference#2	Premium Assignment Corp	Contact	Accts Rec	Phone	(800) 342-0991
Trade Reference#3	Concord Air Center	Contact	Accts Rec	Phone	(704) 906-5556

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 pertinent 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 above listed business and business owner/officer (individually and collectively, "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 transaction, including without limitation the application therefor (collectively, "Transaction") 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

Michael Dockery

Date

01/10/2018