

DBA Name		Lost Creek Marina			Legal Name		_	Lewis Resorts, LLC			
		Marina, Restaurant				Tax ID		91-1776605			LLC
Full Business Addre	SS 3	35211 Hwy	62, Trail,	Oregon 97	7541						
Full Billing Address											
Phone at Location	ne at Location (541) 560-3646				E	Best Phone (541) 7		778-0319 Fax		(541)	560-3269
Business Email		cindybroadwater@charter.net				Website		lostcreeklake.com			
Years In Business	<u>:</u>	35	Av	erage Ticl	ket		. G	ross Annual	Sales	500,000.0	0
Do you currently ha	ave cash a	dvance?	No	N c	ith who? _				Bal	ance	
Current Credit Card	Current Credit Card Processor					Average Processing Volume					
Last Month Vol.		#	of Tickets	·		2nd Month V	ol.		#of	Tickets	
3rd Month Vol.		#	of Tickets	·		4th Month Vo	ol		#of	Tickets	
Owner #1 Name	cindy Broa	udwater			Title	Owner					
Date of Birth	12-02-196				SSN	544-68					
Full Home Address	3130 Cheltenham Way, Medford, OR 97504										
Home Phone	(541) 778-		Cell Phor		(541) 778-0	319 Email		cindybi	roadwater	@charter.net	<u> </u>
Own/Rent	\$ 0 Own		- Years Th	ere <u>13</u>	D	rivers Lience #	2491		State	Orego	
Owner #2 Name					Title						
Date of Birth					SSN						
Full Home Address	-										
Home Phone			Cell Phor	ie _		Email					
Own/Rent	\$		Years Th	ere	D	rivers Lience #			State		
Business Home Bas	ed?	No Lo	cation: Le	ease/Own	Leased	Lease 7	Геrm	6 years	Mon	thly Rent	0.00
Landlord / Mortgage	e Co. <u>n/</u>	a				Со	ntact		n/a		
Contact Phone	_			Cell	_			Email	_		
Bank Name/Branch	Chase Ba	ank		Contact	April			Phone	(541) 7	70-6612	
Trade Reference#1	Frozen G	Gourmet		Contact	Brian			Phone	(530) 22	26-0908	
Trade Reference#2	Napa Au	to Parts		Contact	Alma			Phone	(541) 77	79-6196	
Trade Reference#3	Farmer E	Brothers		Contact	Mike			Phone	(800) 73	35-2878	

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	cindy Broadwater	Date	12/12/2016
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