	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Julian
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DBA Name		Gerner E		/AC Calas C		egal Na	ame	Gerner E		LC		116
Type of Business				/AC Sales &		ax ID		453591	1/4			LLC
Full Business Addre	SS	10951 10	rk Ra, Mor	nkton MD 21	1111							
Full Billing Address		(410) 47	2 2022				(442	\ 46E E003	<u> </u>	Fav	(410) 472-2	220
Phone at Location		(410) 472-2022				Best Phone (443)						229
Business Email		info@gernerenergy.com			Website		www.gernerenergy.com Gross Annual Sales 1,7					
Years In Business		5		Average Tick				Gross An	nuai Sai		1,700,000.00	
Do you currently ha	ve cash	advance?	Υ	res W	ith who?	Cann C	Capital			Bala	ance <u>\$46,000</u>	
Current Credit Card	Process	or				_	Average	Processing	g Volum	e		
Last Month Vol.			#of Ticke	ts		2nd N	Month Vol.			#of	Tickets	
3rd Month Vol.			#of Ticke	ts		4th N	onth Vol.			#of	Tickets	
Owner #1 Name	Robert G	Gerner			Title	9	Owner					
Date of Birth	0205196	54			SSN	I	219-92-61	117				
Full Home Address	15637 York Rd Sparks MD 21152											
Home Phone	(443) 46	5-5803	Cell Ph	one	(443) 465-	5803	Email	k	ip.gerner	@gerne	erenergy.com	
Own/Rent	\$ <u>0 Ow</u>	n	Years ⁻	There 13		Orivers I	ience # G	656745465	096	State	Maryland	_
Owner #2 Name					Title	9						
Date of Birth					SSN	Ī						
Full Home Address												
Home Phone			Cell Ph	-			Email –	_				
Own/Rent	\$		Years	There		Orivers I	_ience #			State		_
Business Home Bas	ed?	No I	Location:	Lease/Own	Leased	l	Lease Ter	m		Mont	thly Rent	_
Landlord / Mortgage	Co. <u>F</u>	Robyn Prop	erties				Conta	act	Ni	ck Piro	ne	
Contact Phone	<u>(</u>	(410) 442-1	1500	Cell	_			E	Email	_		
Bank Name/Branch	PNC / F	Hereford Br	anch	Contact				Phon	ne			
Trade Reference#1	Carroll	Independe	ent Fuel	Contact	Credit [Departi	ment	— Phon	ne (4	110) 26	51-5419	
Trade Reference#2	First Na	ational Cap	oital	Contact	Jeff Bro	dy		Phon	ne (2	215) 54	10-5400	
Trade Reference#3	Bolling	er Energy		Contact	Amanda	a		— Phon	ne (4	110) 32	27-0500	

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	Robert Gerner	Date	04/18/2017
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