MoneyWorks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Jonathan
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DBA Name		HSI Trust -Home	Savers Ltd	Legal	Name	Smart Murals	, LLC	
Type of Business			contracts	Tax II		20-8779959		
Full Business Addres								
Full Billing Address								
Phone at Location	(508) 304-9992			Best Phone (508) 304-9992 Fax			Fax (508) 691-3426
Business Email		bruce2@hsitrust	.org	Website				
Years In Business		8	Average Tick	et	t Gross Annual Sales 1			00.00
Do you currently ha	ve cash	advance?	No W	ith who?			Balance _	
Current Credit Card	Processo	or			Average	Processing Volu	ıme	
Last Month Vol.		#of Tick	kets	2nd	d Month Vol.		#of Ticket	S
3rd Month Vol.		#of Tick	cets	4th	Month Vol.		#of Ticket	S
Owner #1 Name	Bruce Bo	auclay		Title	Evocutivo	Director		
Date of Birth								
Full Home Address	06-26-1957 SSN 182-48-4077 50 Whisper Dr, Worcester MA 01609							
Home Phone	(508) 421-6503 Cell Phone (508) 579-3308 Email bruce2@hsitrust.org							
Own/Rent	\$ 0 Owr		s There 19	(,		85012787		 MA
	·				_			
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address								
Home Phone		Cell F	Phone		Email			
Own/Rent	\$ Own	Year	s There	Driver	s Lience #		State	
Business Home Base	ed?	No Location	: Lease/Own	Leased	Lease Terr	m	Monthly R	ent
Landlord / Mortgage	e Co. <u>M</u>	1 & I Property Mgn	nt.		Conta	act	Ted Kalinowsk	i
Contact Phone	<u>(</u>	774) 437-9303	_ Cell	(774)	437-9303	Email	tek250	@yahoo.com
Bank Name/Branch	DCU Fe	deral Credit Union	Contact			Phone	(800) 328-879	97
Trade Reference#1	Kingsto	n Research Group	– Contact	Douglas Per	kins	— Phone	(401) 783-210)7
Trade Reference#2	Pro-Tec	ch	Contact	Ted Zawalic	k	Phone	(508) 917-881	11
Trade Reference#3	Raskin	Resources	Contact	Patricia Ras	kin	Phone	(401) 440-629	99

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	Bruce Boguslav	Date	05/22/2017