

DBA Name	none		Legal i	Name	Steven Kalishr	nan PA			
Type of Business S-corp			Tax ID		593375149		Corp		
Full Business Address 5055 SW 91 Terrace Gainesville, FL 32608									
Full Billing Address									
Phone at Location	(352) 376-860	0	Best Phone (352) 3		376-8600	Fax	(352) 371-8681		
Business Email	steve@kalishr	nanlaw.com	Website		www.flalitigato	ors.com			
Years In Business	20	Average Tick	et		Gross Annual S	ales 132	2,000.00		
Do you currently have cash advance? Ye		Yes W	With who? Alliance		Balance <u>\$2,000</u>				
Current Credit Card Processor Average Processing Volume									
Last Month Vol.	#of T	ickets	2nd Month Vol.		#of Tickets		ets		
3rd Month Vol.	#of T	ickets	4th Month Vol.			#of Tickets			
Owner #1 Name	Steven Kalishman		Title	President					
Date of Birth	09/19/1953		SSN	267-02-773	33		_		
Full Home Address	10526 SW 55 Place Gaines	ville, FL 32608							
Home Phone	(352) 376-8600 Ce	II Phone ((352) 494-0246	Email	steve@k	alishmanlaw.	com		
Own/Rent	\$ 0 Rent Ye	ears There five	Drivers	Lience # K4	425-790-53-339-0 State FL				
Owner #2 Name			Title						
Date of Birth			SSN						
Full Home Address Home Phone		II Phone		 Email					
Own/Rent		ears There	Drivers Lience #		-	State			
Ownyrtent	ў		Drivers						
Business Home Bas	ed? <u>No</u> Locati	on: Lease/Own	Leased	_Lease Term	n	Monthly	Rent		
Landlord / Mortgage Co. Linda Gogan			Contac		ct <u></u>	Linda Gogan			
Contact Phone	(414) 426-3699	Cell	(414)	426-3699	_ Email	lgoga	n@me.com		
Bank Name/Branch	SunTrust Haile Plantati	on Contact	Manager		Phone	(352) 339-	7200		
Trade Reference#1 Mr. Paper		 Contact	Shane Roach		— Phone	(352) 377-	2737		
Trade Reference#2	Big Daddy Enterprises Conta		Tony McKnight		— Phone	(352) 682-	4872		
Trade Reference#3	VanLandingham Court Repor	Contact	Lynn Dursc	her	Phone	(352) 371-	1537		

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.

gnature#1	Printed Name	Steven Kalishman	Date	01/11/2017
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