MoneyWorks > Dire	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Julian
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DBA Name		Green Ma	atters			Legal N	Name		Green Matter	s LLC			
Type of Business	f Business Retail Garden supply		oply	Tax II)		273211891				LLC	
Full Business Addre	:SS	592 Ware	ham St										
Full Billing Address													
Phone at Location		(508) 92	3-2800			Best I	Phone (50	08) 7	730-9985	Fax	(508)	923-2825	5
Business Email		greenma	tters.sha	aw@gmail.c	com	٧	Vebsite		greenmatters	so <u>nline.co</u>	_ m		
Years In Business		7		Average Ti	cket			(Gross Annual Sales 1,800,0			.00	
Do you currently ha	ave cash	advance?		No	With who?	/ith who?				Balance			
Current Credit Card	d Processo	or				_	Averag	ge Pi	rocessing Vol	ume			
Last Month Vol.			#of Ticke	ets		2nd	Month Vo	ol.		#of	Tickets		
3rd Month Vol.			#of Ticke	ets		4th	Month Vol	l. 		#of ⁻	Γickets		
Owner #1 Name	Lilli Shaw					tle	Owner						
Date of Birth	04-22-19	80			_ SS	5N	130-72-	-1199	9				
Full Home Address	592 Ware	eham st Mid	dleboro M	A	_		-						
Home Phone	(508) 730	D-9985	Cell Ph	none	(508) 730)-9985	Email		greenr	nattersonlir	ne@yahoo.c	om	
Own/Rent	\$ 0 Own	า	— Years	There 5	087309985	Drivers	— Lience #	S		State	MA		
Owner #2 Name					Tif	tle							
Date of Birth					_ 	5N							
Full Home Address													
Home Phone			Cell Ph	none			Email						
Own/Rent	\$		Years	There _		Drivers Lience #				State			
Business Home Bas	ed?	No L	_ocation:	Lease/Ow	n Owne	ed	Lease Te	erm		Mont	hly Rent		
Landlord / Mortgage	e Co. <u>T</u>	TM SHAW					Con	ntact	t	774 634	8327		
Contact Phone				_ Ce	ell				Email				
Bank Name/Branch	Rocklar Middleb	nd Trust / oo		Contac	t				Phone				
Trade Reference#1				- Contac	t				Phone				
Trade Reference#2				- Contac	t				Phone				
Trade Reference#3				– Contac	t				- Phone	_			
I hereby represent that all t authorize you to whom this will provide financial state authorize Money Works Dir	s applicatior ements, tax i	n is made or y returns, etc. a	our agents as you deer	to investigate m necessary.	e my/our finar A photocopy	ncial resp of this au	oonsibility and uthorization v	id cred will be	dit worthiness, sp e deemed as acc	ecifically pri eptable for re	ncipal and cor elease of crec	rporate entit lit information	ties, and on. I/We

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 relating to any of you, to Money Works Direct and to each of the Recipients, on its own behalf.

Signature#1	Printed Name	Lilli Shaw	Date	09/15/2017
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