

DBA Name	ls	sb deli		Leg	gal Name	makk eneterp	orises Ilc				
Type of Business		cafe/coffee shop		Ta:	Tax ID			LLC			
Full Business Address 3350 george washington way richland wa 99336											
Full Billing Address											
Phone at Location (509) 627-8748			В	est Phone (509)	627-8748	Fax					
Business Email	Email hcmugs@msn.com		m		Website						
Years In Business	5	<u>5</u> Average		Ticket		Gross Annual Sales 350,000.00					
Do you currently ha	ave cash adv	ance?	No W	lith who?			Balance				
Current Credit Card Processor Average Processing Volume						ume					
Last Month Vol.		#of Tick	ets		2nd Month Vol.		#of Tickets				
3rd Month Vol.		#of Tick	ets		4th Month Vol.		#of Tickets				
Owner #1 Name	megan artz			Title	owner						
Date of Birth	04061987			SSN	534-17-922	2					
Full Home Address	617 s hunting	gton pl kennewick	wa 99336								
Home Phone	(509) 627-87	748 Cell P	hone	(509) 627-87	48 Email	hcmug	s@msn.com				
Own/Rent	\$ <u>0</u> Own	Years	There 1	Dri	ivers Lience # art	z*my131jf	State washington				
								_			
								_			
Owner #2 Name				Title				_			
Date of Birth				Title SSN							
Date of Birth Full Home Address		Call D	hono		Email						
Date of Birth Full Home Address Home Phone	¢.	Cell P	-	SSN	Email		Stata				
Date of Birth Full Home Address	\$		hone	SSN	Email ivers Lience #		State				
Date of Birth Full Home Address Home Phone	· ·	Years	-	SSN			State Monthly Rent				
Date of Birth Full Home Address Home Phone Own/Rent	ed? No	Years	There	SSNDri	ivers Lience #	-		-			
Date of Birth Full Home Address Home Phone Own/Rent Business Home Bas	ed? No	Years  O Location	There	Dri	vers Lience # Lease Term	-	Monthly Rent	-			
Date of Birth Full Home Address Home Phone Own/Rent Business Home Bas Landlord / Mortgage	eed? No copp (509	Years  O Location  Derwood	: Lease/Own	Dri	Lease Term	t	Monthly Rent	-			
Date of Birth Full Home Address Home Phone Own/Rent  Business Home Bas Landlord / Mortgage Contact Phone	eed? Note to be compared to be compa	Years  Location  perwood  371-7622  munity credit	: Lease/Own	Dri	Lease Term Contact 09) 371-7622	Email	Monthly Rent				
Date of Birth Full Home Address Home Phone Own/Rent  Business Home Bas Landlord / Mortgage Contact Phone  Bank Name/Branch	e Co. copp (509 hapo comi uni cash and c	Years  O Location Derwood  O) 371-7622  munity credit	: Lease/Own  Cell  Contact		Lease Term Contact 09) 371-7622	Email Phone	Monthly Rent heather wheeler				
Date of Birth Full Home Address Home Phone Own/Rent  Business Home Bas Landlord / Mortgage Contact Phone  Bank Name/Branch Trade Reference#1	hapo comuni  cash and c	Years  O Location Derwood  O) 371-7622  munity credit	: Lease/Own  Cell  Contact  Contact	Leased (50) greg balkelsie le	Lease Term Contact 09) 371-7622	Phone Phone	Monthly Rentheather wheeler(509) 946-1716				

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	megan artz	Date	01/11/2017