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DBA Name		Furniture For Less				Furniture For Less Incorportated		ortated
Type of Business		Corporation		Ta	ax ID	0141139277	1	Corp
Full Business Addre	:SS	5729 E. 86th St						
Full Billing Address								
Phone at Location	Phone at Location			Best Phone			Fax	(317) 841-9841
Business Email					Website	www.indyfurnitureforless.com		
Years In Business		5	Average Tick	ket		Gross Annua	l Sales <u>3</u>	.60
Do you currently h	ave cash a	advance?	Yes W	ith who? _			Balan	ce <u>146,000</u>
Current Credit Card Processor				Average Processing Volume				
Last Month Vol.		#of Tick	cets		2nd Month Vol.		#of Tic	ckets
3rd Month Vol.		#of Tick	cets		4th Month Vol.		#of Tic	kets
Owner #1 Name	Jason Bled	dsoe		Title	CEO			
Date of Birth	11/04/197	76		SSN	315-84-47	43		
Full Home Address	377 S. Au	dubon Rd. Indianapo	olis, IN 46219					
Home Phone	(317) 696	-9395 Cell F	Phone –		Email	jbled7	6@gmail.com	
Own/Rent	\$ 0 Rent	Year	s There	D	rivers Lience #	State		
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address								
Home Phone		Cell F	Phone –		Email			
Own/Rent	\$	Year	s There	D	rivers Lience #		State	
Business Home Bas	sed?	No Location	: Lease/Own	Leased	Lease Terr	n	Monthl	y Rent
Landlord / Mortgag	e Co				Conta	ict		
Contact Phone			_ Cell	_		Emai	il	
Bank Name/Branch	Regions		Contact	Geoff Su	itton	Phone	(317) 888-	1607
Trade Reference#1	America	n Wholesale	– Contact	Jim Mahi	n	— Phone	(317) 357-	1957
Trade Reference#2	Furnitur	e Distributors	Contact	Tom Neu		Phone	(317) 357-	4636
Trade Reference#3	Souther	n Motion	 Contact 	Mike Ne	eley	— Phone —	(662) 488-	4007
I horoby represent that all	the above inf	formation is true and ur	dorstand that ma	king false stat	coments might be con	cidored fraud. By n	royiding the abo	us information, the applicant(s)

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	Jason Bledsoe	Date	11/16/2016
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