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DBA Name		Vest Account		gal Name	Tunink Vest Acc	ount		
Type of Business	-	al Services		ix ID	478-72-7050		Sole Prop	
Full Business Addre	ss <u>1011 Off</u>	ice Park Road, Suite 8	s; West Des l	Moines, IA 50265	5			
Full Billing Address								
Phone at Location (515) 250-5371		Best Phone (515) 250-5371 Fax			Fax			
Business Email	tuninkv	/@hdvest.net		Website				
Years In Business	21	Average Tid	cket		Gross Annual Sa	les <u>356,800.00</u>		
Do you currently ha	ave cash advance?	No N	With who? _			Balance		
Current Credit Card Processor				Average	verage Processing Volume			
Last Month Vol.		#of Tickets		2nd Month Vol.		#of Tickets		
3rd Month Vol.		#of Tickets		4th Month Vol.		#of Tickets		
Owner #1 Name	William Tunink		Title	Owner				
Date of Birth	07/03/1953		- SSN	478-72-70	050			
Full Home Address	4723 66th St; Urbai	ndale, IA 50322	-					
Home Phone	(515) 250-5371	Cell Phone	(515) 250-53	371 Email	tuninkw@	hdvest.net		
Own/Rent	\$ 0 Own	Years There 24	Dr	rivers Lience # 5	88WW3144	State Iowa		
Owner #2 Name			Title					
Date of Birth			SSN					
Full Home Address								
Home Phone		Cell Phone		Email				
Own/Rent	\$	Years There	Dr	rivers Lience # _		State		
Business Home Bas	ed? No	Location: Lease/Own	Leased	Lease Terr	m	Monthly Rent		
Landlord / Mortgage	e Co			Conta	act			
Contact Phone		Ce	II		Email			
Bank Name/Branch		Contact			Phone			
Trade Reference#1		Contact			Phone			
Trade Reference#2		Contact			Phone			
Trade Reference#3		Contact			Phone			
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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	William Tunink	Date	07/26/2017