

DBA Name	OPER		Legal Name	OPER, LLC	
Type of Business	Mobile Payment		Tax ID	47-3276196	LLC
Full Business Address	911 Washington Ave, Suite 418, St. Louis, MO 63101				
Full Billing Address					
Phone at Location	(866) 704-0958		Best Phone	(814) 777-1373	Fax
Business Email	DavidL@paywithoper.com		Website	www.paywithoper.com	
Years In Business	2	Average Ticket		Gross Annual Sales	450,000.00
Do you currently have cash advance?	No	With who?		Balance	
Current Credit Card Processor			Average Processing Volume		
Last Month Vol.		# of Tickets		2nd Month Vol.	
3rd Month Vol.		# of Tickets		4th Month Vol.	

<b>Owner #1 Name</b>	David Laiderman		Title	CEO	
Date of Birth	05-12-1981		SSN	514-82-8568	
Full Home Address	2734 Wynncrest Manor Dr, Chesterfield, MO 63005				
Home Phone	(814) 777-1373	Cell Phone	(814) 777-1373	Email	DavidL@paywithoper.com
Own/Rent	\$ 0 Own	Years There	2	Drivers Lience #	A114307012
				State	Missouri
<b>Owner #2 Name</b>			Title		
Date of Birth			SSN	--	
Full Home Address					
Home Phone		Cell Phone		Email	
Own/Rent	\$ Own	Years There		Drivers Lience #	
				State	

Business Home Based?	No	Location: Lease/Own	Leased	Lease Term	Monthly	Monthly Rent	1,100.00
Landlord / Mortgage Co.	TRex			Contact	Gwyn Fry		
Contact Phone	(314) 241-7500	Cell		Email			

Bank Name/Branch	PNC Bank	Contact	Bryan Allen	Phone	(314) 801-9680
Trade Reference#1	MenuDrive	Contact	Adrian Fang	Phone	(877) 787-6368
Trade Reference#2	Madison Capital	Contact	Kelly Battaglia	Phone	(443) 796-7335
Trade Reference#3		Contact		Phone	

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 pertinent 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 above listed business and business owner/officer (individually and collectively, "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 transaction, including without limitation the application therefor (collectively, "Transaction") 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	David Laiderman	Date	01/25/2017
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