MoneyWorks Direct ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809	
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DBA Name The Learning (	Garden	Legal Name	Midwest Child Development, LLC	
Type of Business Child Care Cer	Child Care Center (3 locations)		46-5605732 LLC	
Full Business Address 1514 Englewoo	d Avenue			
Full Billing Address				
Phone at Location (651) 645-122	5	Best Phone (763	) 221-1194 Fax	
Business Email info@midwest	info@midwestchilddevelopment.com		www.thelearninggarden.us	
Years In Business 7	Average Ticket		Gross Annual Sales 850,000.00	
Do you currently have cash advance?	No With wh	0?	Balance	
Current Credit Card Processor		Average	Processing Volume	
Last Month Vol #of T	ickets	2nd Month Vol.	#of Tickets	
3rd Month Vol. #of T	ickets	4th Month Vol.	#of Tickets	
Owner #1 Name Angela Kapp	-	Title Owner/Dir	rector	
Date of Birth 06/26/1970		SSN Ark-74-18	79	
Full Home Address 800 County Road D West, 1	.03			
Home Phone (763) 221-1194 Ce	II Phone (763) 2	21-1194 Email	angelakapp@midwestchilddevelopment.com	
Own/Rent \$ 0 Rent Ye	ears There 3	Drivers Lience # _P	076142152613 State Minnesota	
Owner #2 Name		Title		
Date of Birth		SSN		
Full Home Address				
	Il Phone	Email		
Own/Rent \$ Ye	ears There	Drivers Lience #	State	
Business Home Based? No Locati	on: Lease/Own <u>Lea</u>	sed Lease Ter	mMonthly Rent	
Landlord / Mortgage Co. Hamline church		Conta	act Amy Perna	
Contact Phone (651) 645-0667	Cell		Email	
Bank Name/Branch Wells Fargo	Contact		Phone (651) 205-6333	
Trade Reference#1 Affiliated Insurance	Contact		Phone (763) 551-1300	
Trade Reference#2 Van Paper	Contact		Phone (651) 690-1751	
Trade Reference#3 Sysco	Contact Brad	<u> </u>	Phone (612) 423-0420	

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	Angela Kapp	Date	08/15/2019