MoneyWorks >>	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Luciano

DBA Name		Liberty Tax S	ervice		Ιe	gal Name	1964			
<del></del>			counting, income tax		-	260747811		LLC		
Full Business Addre	-	.0717 E GAR\		meome tax	- ' '	X 1D	2007 17011			
Full Billing Address	33 1	OTTT L GAIN	LIAVL							
Phone at Location				Be	est Phone(626	5) 274-9194	Fax	(855) 592-5042		
Business Email	ELMONTE@LIBERTYTAX.CC			OM	<del></del>		WWW.LIBERTYTAX.COM			
Years In Business	•	11 Average Ticket			-		Gross Annual Sales 145,000.00			
Do you currently ha	– ave cash ac	dvance?	No	With who	?			– Balar	nce	
Current Credit Card							Processing Vo	_		
Last Month Vol.		#of	Tickets			2nd Month Vol.	_	#of Ti	ckets	
3rd Month Vol.		—— #of	Tickets		-	4th Month Vol.		— #of Ti	ckets	
					-			_ " - ' ' '		
Owner #1 Name	luis aguilar			Ti	tle	Manager				
Date of Birth	06/05/1964	ļ			SN	607-42-14	470			
Full Home Address	12440 ELLI	ОТТ								
Home Phone	(626) 444-3	3205 C	ell Phone	(626) 274	4-91	.94 Email	AGUI	LAR@LIBERTY	ГАХ.СОМ	
Own/Rent	\$ <u>0 Own</u>		ears There	30 PLUS	_Dri	ivers Lience # _A	 \8787803	State	CA	
Owner #2 Name				Ti	tle					
Date of Birth				SS	SN					
Full Home Address										
Home Phone		C	ell Phone			Email				
Own/Rent	\$		ears There		_Dri	ivers Lience # _		State		
Business Home Bas	ed? !	No Loca	tion: Lease/0	Own Lease	ed	Lease Ter	m	Month	ly Rent	
Landlord / Mortgage	e Co. MIA	 A MANAGEME	NT			 Conta	act	62653350	00	
Contact Phone				Cell			Ema	 iil		
	DANK 05	THE WEST						-		
Bank Name/Branch	-		Cont				Phone			
Frade Reference#1 microsoft Contact					Phone					
Trade Reference#2	transactio	on central	Cont	act			Phone			
Trade Reference#3	time warı	ner	Cont	act			Phone			
									ove information, the applicant(s) ipal and corporate entities, and	

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	Luis Aguilar	Date	03/26/2019
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