

DBA Name	African Flavours		Legal Name	African Flavours	
Type of Business	Wholesale food distributors		Tax ID	261123857	LLC
Full Business Address	1655 manheim pike				
Full Billing Address					
Phone at Location	(717) 875-3108		Best Phone	(717) 875-3108	Fax
Business Email	bomas777@yahoo.com		Website		
Years In Business	13	Average Ticket		Gross Annual Sales	240,000.00
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.	
					#of Tickets
3rd Month Vol.		#of Tickets		4th Month Vol.	
					#of Tickets

Owner #1 Name	Geoffrey Kinyanjui		Title	Sales manager/owner	
Date of Birth	08/21/68		SSN	169-q6-1697	
Full Home Address	30 colonial crest drive Lancaster pa 17601				
Home Phone	(717) 875-3108	Cell Phone	(717) 875-3108	Email	bomas777@yahoo.com
Own/Rent	\$ 0 Own	Years There	7178753108	Drivers Lience #	23590751
				State	PA
Owner #2 Name			Title		
Date of Birth			SSN		
Full Home Address					
Home Phone		Cell Phone		Email	
Own/Rent	\$	Years There		Drivers Lience #	
				State	

Business Home Based?	No	Location: Lease/Own	Leased	Lease Term	Monthly Rent
Landlord / Mortgage Co.	Stowaway		Contact	7175698229	
Contact Phone		Cell	(717) 569-8229	Email	

Bank Name/Branch	Everence credit union	Contact	Michael Roanan	Phone	(717) 735-8330
Trade Reference#1	Indian food and spices	Contact	Anita or vivyak	Phone	(732) 499-7388
Trade Reference#2	Indus foods	Contact	Jephat	Phone	(301) 989-9448
Trade Reference#3	Bismilah	Contact	Mohamend or Ashad	Phone	(301) 434-0051

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	Geoffrey Kinyanjui	Date	01/17/2017
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