MoneyWorks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Joe
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DDA N		Th - DCA				LNI		h - D i			
DBA Name		The RCA				egal Name	_	he Renaissa	ance Acad	emy	
Type of Business		Private :			T	ax ID	4	75580032			Corp
Full Business Addre	SS	210 64th	Street So	uth							
Full Billing Address											
Phone at Location		(205) 53	38-5764			Best Phone (2	205) 42	1-0363	Fax	(205)	538-5767
Business Email		thercabl	ham@gma	ail.com		Website	w	ww.therabl	ham.org		
Years In Business		1		Average Tick	et		_ Gr	ross Annual	Sales	150,000.0)
Do you currently ha	ave cash	advance?		No W	ith who? _				_ Bal	ance	
Current Credit Card	l Process	or				Avera	age Pro	cessing Vol	lume		
Last Month Vol.			#of Ticke	ets		2nd Month V	ol.		#of	Tickets	
3rd Month Vol.			#of Ticke	ets		4th Month V	ol		_ #of	Tickets	
Owner #1 Name	Jamero C	Callins			Title	Presid	ent				
Date of Birth	11-07-19				SSN	421-08	8-9442				
Full Home Address	440 Polo	Trace Chel	sea, AL 350	 143							
Home Phone	(205) 503	3-6543	Cell Ph	one		Email		callins	jc@yahoo.d	com	
Own/Rent	\$ 0 Owi	n	Years	There $\frac{1}{1}$	D	rivers Lience #	67802	269	State	Alabar	na
Owner #2 Name					Title						
Date of Birth					SSN						
Full Home Address											
Home Phone			Cell Ph	one _		Email					
Own/Rent	\$		Years	There	D	rivers Lience #			State		
Business Home Bas	ed?	No	Location:	Lease/Own	Leased	Lease ⁻	Term		Mon	thly Rent	
Landlord / Mortgage	e Co.					Co	ontact				
Contact Phone	_			Cell	_			Emai	l <u> </u>		
Bank Name/Branch	The Pe	oples Banl	c of Ala	Contact				Phone	(205) 60	08-8000	
Trade Reference#1				Contact				Phone			
Trade Reference#2				Contact				Phone			
Trade Reference#3				Contact				Phone			
I hereby represent that all	the above in	nformation is	true and und	erstand that mal	king false sta	tements might he	consider	red fraud. By n	roviding the a	above informat	ion, the applicant(s)

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	Jamero Callins	Date	09/23/2016
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