MoneyWorks >>	Sales Rep: Julian

DBA Name	Higher Learning Child Care Aca			cademy Legal Name			Higher Learning Child Care Academy					
Type of Business		childcar	e			Tax ID		56-220	7565			Corp
Full Business Addre	ss	1260 Airr	oort Road	b								
Full Billing Address												
Phone at Location		(704) 48	34-9001			Best	Phone <u>(704</u>	) 923-246	<u> </u>	Fax	(704) 481-	7726
Business Email		barbaral	borders1	@gmail.com		٧	Vebsite	higherl	earningcl	hildcare.d	com	
Years In Business		24		Average Tic	ket _			Gross A	nnual Sa	les <u>5</u>	00,000.00	
Do you currently ha	ave cash a	idvance?		Yes V	Vith who?	Kash	Capital			Balan	ce <u>7,000</u>	
Current Credit Card	d Processo	r				_	Average	Processir	ng Volum	е		
Last Month Vol.			#of Tick	cets		2nd	Month Vol.			#of Tid	kets	
3rd Month Vol.			#of Tick	cets		4th	Month Vol.			#of Tid	ckets	
Owner #1 Name	Barbara M	linder			Tit	le	owner					
Date of Birth	03201997	,			SS	N	244-19-15	522				
Full Home Address	1215 New	Crest Lan	e									
Home Phone	(704) 923	-2468	Cell P	hone	(704) 923	-2468	Email		bminder.h	ılcca@gma	ail.com	
Own/Rent	\$ 0 Rent		Year	s There		Drivers	 s Lience # <u>6</u>	158425		State	NC	_
Owner #2 Name					Tit							
Date of Birth					SS	N						
Full Home Address												
Home Phone			Cell F				Email	-		_		
Own/Rent	\$		_ Year	s There		Drivers	Lience #			State		_
Business Home Bas	ed?	No	Location	: Lease/Own	Lease	d	_Lease Ter	m		Monthl	y Rent	
Landlord / Mortgage	e Co						Conta	act	<u>Jin</u>	nmy Yark	oro	
Contact Phone	<u>(7</u>	04) 466-	5753	_ Cel	l <u>-</u>				Email			
Bank Name/Branch				Contact				Pho	ne			
Trade Reference#1	_			Contact				 Pho	ne			
Trade Reference#2				– Contact				— Pho	ne			
Trade Reference#3				– Contact				— Pho	ne			
I hereby represent that all	the above inf	ormation is	true and ur	nderstand that m	aking false s	tatemer	its might be con	sidered frau	d. By provid	ling the abo	ve information, th	e 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	Barbara Minder	Date	07/28/2017