MoneyWorks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Julian
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DBA Name	LOHMANN FENCII	IG	Legal Name		EDDIE LOHMANN		
Type of Business	CONTRACTOR		Tax ID		73-1473842		Sole Prop
Full Business Addre	ss <u>1101 N 14th</u>						
Full Billing Address							
Phone at Location	(580) 540-4012		Best Phone (580)		402-2780	Fax	(580) 540-4012
Business Email	lohmannfencing@	att.net	Website				
Years In Business	20+	Average Ticket			Gross Annual S	Sales 500	0,000.00
Do you currently ha	ave cash advance?		With wh	no?		E	Balance
Current Credit Card	l Processor			Average F	Processing Volu	me _	
Last Month Vol.	#of Ticke	ets	2nd N	onth Vol.		#of Tick	ets
3rd Month Vol.	#of Ticke	ets	4th Month Vol.			#of Tickets	
Owner #1 Name	EDDIE LOHMANN		Title	OWNER/OP	ERATOR		
Date of Birth	11-01-1950		SSN	443-50-398	34		
Full Home Address	1101 N. 14th						
Home Phone	(580) 402-2780 Cell Pl	02-2780 Cell Phone (580) 402-2780 Email lohmannfencing@att.net				net	
Own/Rent	\$ 0 Own Years	There 10+	Drivers l	– ₋ience # <u>_b0</u>	81462990	State	OK
Owner #2 Name			Title				
Date of Birth			SSN				
Full Home Address	Cell Pl			Email			
Home Phone						Ctata	
Own/Rent	\$ Years		Drivers t			State	
Business Home Base	ed?NoLocation:	Lease/Own O	wned	Lease Term	1	Monthly	Rent
Landlord / Mortgage	e Co			Contac	ct _		
Contact Phone		Cell			_ Email		
Bank Name/Branch	CITY NATIONAL BANK	Contact T	ARA		Phone	(580) 234-	8571
Trade Reference#1	CUMMINS CONSTRUCTION	MMINS CONSTRUCTION Contact MI		IIKE BYERS		(580) 548-	4568
Trade Reference#2	NINEMIRE FENCE	MIRE FENCE Contact JOI		DHN NINEMIRE		(620) 617-	4588
Trade Reference#3	SHERWOOD CONSTRUCTION	Contact R	OD ABBOTT	-	Phone	(918) 266-	6861

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	EDDIE LOHMANN	Date	07/13/2016
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