

DBA Name		Jared Young Chiropractic, Inc			_Legal Name		Jared Young Chiropractic, Inc		
Type of Business		Chiropractic Clinic			Tax ID		474163524		Corp
Full Business Address 8780 Warner Ave #11, Fountain Valley, CA 92708									
Full Billing Address									
Phone at Location		(714) 847-89	89		Best Phone	e (714)	591-3601	Fax	(714) 908-7597
Business Email		jaredyoung6@		Website		www.triadwgoc.com			
Years In Business		2	Average Tic	cket		Gross Annual Sales 350,000		350,000.00	
Do you currently ha	ave cash	advance? Yes		Vith who?	ith who? Forward Financing			Balance <u>18000</u>	
Current Credit Card Processor Average Processing Volume									
Last Month Vol.		#of	Tickets		2nd Mon	th Vol.		#of ٦	Tickets
3rd Month Vol.		#of	Tickets	4th Month Vol.				#of Tickets	
Owner #1 Name	Jared You	ıng		Tit	le Pr	resident			
Date of Birth	04/28/1973			SS	SSN 452-49-2177				
Full Home Address	18797 Roxbury Ln, Huntington Beach, CA 92648								
Home Phone	(714) 591-3601 Cell Phone (714) 591-3601 Email jaredyoung6@gmail.com							ail.com	
Own/Rent	\$ 0 Rent Years There 2 Drivers Lience # f2788646 State California (CA)								
Owner #2 Name				Tit	le				
Date of Birth				SS	N				
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								hly Rent	
Landlord / Mortgage	e Co. <u>V</u>	Varner Plaza				Contac	ct	David Me	nahem
Contact Phone	<u>(!</u>	562) 773-2242	Cell	l .			_ Email		
Bank Name/Branch	Union E	Bank	Contact	Marga	aret Rodrigi	uez	Phone	(949) 85	56-4143
Trade Reference#1	Newhor	oe Medical	Contact	Sam	Sam Mashoud		— Phone	(818) 58	31-8396
Trade Reference#2	Escoto Chiropractic		Contact	Jense	Jensen Escoto		— Phone	(951) 50	00-8636
Trade Reference#3	Summit Financial Services		ices Contact	Doug	Doug Gahn		Phone	(714) 45	54-7719

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 Jared Young Date 01/12/2017