

DBA Name		Docks Bar and Grill		Legal Name		Docks Bar and Grill				
Type of Business		Docks Bar and Grill		Tax ID		Docks Bar and Grill		_	LLC	
Full Business Addre	ess	313 E. Liberty St	reet							
Full Billing Address										
Phone at Location		(847) 526-9993		Best Phone (847) 5		526-9993	Fax	(847) 526-2446	6	
Business Email		info@docksbarandgrill.com		Website		docksbarandgrill.com				
Years In Business		10 y	Average Tick	cet		Gross Annua	Sales <u>2,7</u>	00,000.00		
Do you currently h	ave cash a	advance?	Yes W	ith who? Kabba	ge & Knight	Capital	Balance	150000.00		
Current Credit Card Processor Average Processing Volume										
Last Month Vol.		#of Tic	kets	2nd	Month Vol.		#of Tick	ets		
3rd Month Vol.		#of Tic	kets	4th	Month Vol.		#of Tick	ets		
Owner #1 Name	Jeff Lencid	oni		Title	Owner					
Date of Birth	03191957			SSN 320-52-0995						
Full Home Address	25138 N Pawnee Road, Barrington IL 60010									
Home Phone	(847) 526-9993 Cell Phone (847) 341-4809 Email lencionimeats@aol.com									
Own/Rent	\$ <u>0 Own</u>	Yea	rs There 20 y	/Drivers	Lience # <u>L5</u>	25-4305-7081	State	<u>IL</u>		
Owner #2 Name				Title						
Date of Birth				SSN						
Full Home Address										
Home Phone	Cell Pho		_							
Own/Rent	\$	Yea	rs There	Drivers	Lience #		State			
Business Home Bas	sed?	No Locatio	n: Lease/Own	Owned	_Lease Term	n	Monthly	Rent		
Landlord / Mortgag	e Co				Contac	ct				
Contact Phone	_		Cell			_ Emai	I			
Bank Name/Branch	MB Fina	ncial	Contact	Valeris Mack		Phone	(847) 540-4	551		
Trade Reference#1	Sysco F	oods	— Contact	Joe		– Phone	(800) 767-9	726		
Trade Reference#2	Perform	ance foods	— Contact	Bob Mers		– Phone	(224) 715-8	992	_	
Trade Reference#3	Kloss		 Contact 	Zach		– Phone –	(847) 366-8	216		
I horoby represent that all	the above int	formation is true and i	inderstand that ma	king false statement	s might he sons	idorod fraud. By n	roviding the above	information the ann	olicant(c)	

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	Jeff Lencioni	Date	05/04/2017
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