MoneyWorks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Patrick

DBA Name		usa pro	roofing a	nd constructio	n LLC Le	egal Name	usa pro roof	ing	
Type of Business		Constru	uction		Tā	ax ID	463636917		LLC
Full Business Addre	SS	9 pione	er dr						
Full Billing Address									
Phone at Location	Location (719) 232-9472				E	Best Phone (719)	232-9472	Fax	
Business Email		usapro	roofing.co	n@gmail.com		Website			
Years In Business		13		Average Tick	et		Gross Annua	Sales <u>600,000.00</u>	
Do you currently ha	ave casl	n advance?	?	No Wi	ith who? _			Balance	
Current Credit Card	d Proces	sor				Average F	Processing Vo	lume	
Last Month Vol.			#of Tick	ets		2nd Month Vol.		#of Tickets	
3rd Month Vol.			#of Tick	ets		4th Month Vol.		#of Tickets	
O #1 N	Daniell	W - III -			T'u -				
Owner #1 Name	Daniel I 02/09/1				Title	owner			
Date of Birth Full Home Address	9 pione				SSN				
Home Phone		32-9472	Cell P	hono		Email	ucanr	oroofing.con@gmail.com	
				_					
Own/Rent	\$ <u>0 O</u>	/VII		There 3	D	rivers Lience # h1	3871996	State <u>ne</u>	
Owner #2 Name					Title				
Date of Birth	-				SSN				
Full Home Address									
Home Phone			Cell P	hone		Email			
Own/Rent	\$		Years	There	D	rivers Lience #		State	
Business Home Bas	ed?	No	Location	: Lease/Own	Owned	Lease Term	1	Monthly Rent	
Landlord / Mortgage	e Co.	fist state k	- oank			Contac	ct	 John	
Contact Phone		(308) 928	-2929	Cell			_ Emai	I	
Bank Name/Branch	first s	tate bank		Contact	john		Phone	(308) 928-2929	
Trade Reference#1				- Contact			– Phone		
Trade Reference#2				- Contact			– Phone		
Trade Reference#3				Contact			– Phone		
I hereby represent that all	the above	information is	s true and un	derstand that mak	ing false stat	tements might be consi	idered fraud. Bv p	roviding the above information	n, 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	Daniel Kelly	Date	02/23/2018