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

DBA Name		Hemper co	)		Legal N	ame	Hemper co LL		
Type of Business				Tax ID		473190381		LLC	
Full Business Addre	SS		parkway suite	======================================	-				
Full Billing Address			., ., .,						
Phone at Location		(301) 928-	6005		Best P	hone (301)	928-6005	Fax	
Business Email		bryan@he	mper.co		W	ebsite	www.Hemper.		
Years In Business		2	Averag	e Ticket	-		Gross Annual S	Sales 1,300,00	00.00
Do you currently ha	ave cash a	advance?	No	With who	?			Balance	
Current Credit Card	d Processo	or				Average	Processing Volu	me	
Last Month Vol.		#	of Tickets		 2nd	Month Vol.		#of Tickets	
3rd Month Vol.		<del></del> #	of Tickets		4th I	Month Vol.		#of Tickets	
					•				
Owner #1 Name	bryan Ge	rber		Ti	tle	ceo			
Date of Birth	04301993	1		SS	5N	213-33-42	76		
Full Home Address	1920 14tl	h st NW apt 7	36						
Home Phone	(301) 928	3-6005	Cell Phone	(301) 928	3-6005	Email	bryan@	hemper.co	
Own/Rent	\$ <u>0 Own</u>	l <u> </u>	Years There	3019286005	Drivers	Lience #		Statema	ryland
Owner #2 Name				Ti	tle				
Date of Birth				SS	5N				
Full Home Address									
Home Phone			Cell Phone			Email —			
Own/Rent	\$		Years There		_Drivers	Lience #		State	
Business Home Bas	ed?	Yes Lo	cation: Lease/	Own Lease	ed	Lease Tern	n 10	Monthly Rent	2,600.00
Landlord / Mortgage	e Co. se	eena interna	ational			Conta	ct	 seena internatior	nal
Contact Phone	(5	516) 840-10	17	Cell	(516) 8	40-1017	Email	rj@onelife	ecig.com
Bank Name/Branch			Con	tact			Phone		
Trade Reference#1			Con	tact			– Phone		
Trade Reference#2			Con				– Phone		
Trade Reference#3			Con				– Phone		
I hereby represent that all	the above in	formation is tru	e and understand t	that making false	statement	s might be cons	idered fraud. By pro	viding the above inforr	nation, 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	bryan Gerber	Date	11/14/2016