

DBA Name			URGENT TAX HELP			URGENT TAX HELP			
Type of Business		Resolution		 T	ax ID	471463936			Corp
Full Business Addre	ess	13351-d river	side Dr #462					_	·
Full Billing Address									
Phone at Location		(866) 502-41	L67		Best Phone (818) 216-0457	Fax	(818)	475-1744
Business Email		taxurgenthe	lp@gmail.com		Website	Urgenttaxhelp	o.org		
Years In Business		2014	Average T	icket		Gross Annual S	Sales 850	,000.0	0
Do you currently h	ave cash a	advance?	No	With who?			Balance	!	
Current Credit Card	d Processo	or			Average	Processing Volu	ime		
Last Month Vol.		#of	Tickets		 2nd Month Vol.		#of Ticke	ets	
3rd Month Vol.		#of	Tickets		4th Month Vol.		#of Ticke	ets	
O #1 No	II II IA IZi-			Title	- CFO				
Owner #1 Name	JULIA Kies 07/30/203			— Title)// E			
Date of Birth Full Home Address		oldstream Way		_ SSN	214-07-20	J43 			
Home Phone	(866) 502		Cell Phone	(818) 216-0	0.457 [mail	holn@u	raanttayhaln a	ra	
				-			rgenttaxhelp.o		
Own/Rent	\$ <u>0 Own</u>	<u> </u>	Years There _		Drivers Lience # $\frac{\Box}{\Box}$	08020125	State	CA	
Owner #2 Name				Title	2				
Date of Birth				— SSN	 I				
Full Home Address				_	-				
Home Phone		(Cell Phone		Email				
Own/Rent	\$		Years There _		Drivers Lience #		State		
Business Home Bas	sed?	No Loca	ition: Lease/Ow	n Leased	d Lease Ter	m 3 Year	Monthly	Rent	3,065.00
Landlord / Mortgag	e Co.				Conta	act			
Contact Phone	_		Ce	ell <u>(</u>	310) 266-3766	Email			
Bank Name/Branch	CHASE		Contact			Phone			
Trade Reference#1			 Contact	 t		Phone			
Trade Reference#2			 Contact	 t		— Phone			
Trade Reference#3			 Contact			— Phone			
I hereby represent that all	the above in	formation is true a	nd understand that	making false sta	atements might be con	 usidered fraud. By pro	viding the above	informat	tion, 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	JULIA Kies	Date	09/04/2019