

DBA Name		Rockeye Aut	0	Le	egal Name	Rockeye Ca	pital, LLC		
Type of Business		Auto sales		T	Tax ID				LLC
Full Business Addre	:SS	1701 E. Main	St						
Full Billing Address									
Phone at Location		(614) 945-39	998	Best Phone			Fax	(614) 573-052	7
Business Email		mborello@rockeyeauto.com			Website		o.com		
Years In Business <u>5</u>		5 Average Tic		cket	ket		Gross Annual Sales 350,000.00		
Do you currently h	ave cash a	advance?	No	With who? _			Balan	ce	
Current Credit Card Processor				_ Average	Processing Vo	lume			
Last Month Vol.		#of	Tickets		2nd Month Vol.		#of Tid	ckets	
3rd Month Vol.		#of	Tickets		4th Month Vol.		#of Tio	ckets	
Owner #1 Name	Matthew	Borello		Title –	Owner				
Date of Birth	10021976			SSN -	273-86-01	.39			
Full Home Address	6400 Chippenhook ct								
Home Phone	(614) 945	-3998 (Cell Phone	(330) 268-7	209 Email	Mbore	ello@rockeyea	uto.com	
Own/Rent	\$ <u>0 Own</u>		Years There $\frac{5}{}$	D	rivers Lience # R	A855397	State	ОН	
Owner #2 Name				Title –					
Date of Birth				SSN -					
Full Home Address									
Home Phone		(Cell Phone		Email				
Own/Rent	\$		Years There	D	rivers Lience #		State		
Business Home Bas	sed?	No Loca	ation: Lease/Owr	n <u>Leased</u>	Lease Terr	m	Monthl	y Rent	
Landlord / Mortgag	e Co				Conta	act			
Contact Phone	_		Ce	ell		Ema	il		
Bank Name/Branch	Chase		Contact			Phone	(614) 248	-2700	
Trade Reference#1	Manheir	m Ohio	 Contact	Marcella	ì	 Phone	(614) 871	-2771	
Trade Reference#2	S&S Aut	to	Contact	Mark		Phone	(614) 793-	-0410	
Trade Reference#3	Auto Zo	ne	Contact	Austin		 Phone	(614) 761-	-1569	
I hereby represent that all	the above in	formation is true a	nd understand that n	naking false sta	tements might be con-	sidered fraud. By r	providing the abo	we information, the an	nlicant(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	Matthew Borello	Date	08/27/2019