MoneyWorks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Kevin
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DBA Name		IntraWorks Inc.		ا	egal Name	Kevin Mayer		
Type of Business		Security and Fi			ax ID	01-0549808		Corp
Full Business Addre		7910 Lorraine C		ilistali 16	ax ID	01-0349000		Согр
	:55	7910 Lorraine C	I. IVL					
Full Billing Address Phone at Location		(505) 385-3200	<u> </u>		Best Phone (505	3) 385-3200	Fax	
Business Email		kmayer@intrav			Website	www.intrawork		
				-14	website			
Years In Business		16	Average Tic			Gross Annual Sa		_
Do you currently h	ave cash a	advance?	Yes \	With who? <u>l</u>	ntraWorks Inc.		Balance <u>\$550,00</u>	0
Current Credit Card	d Processo	or			Average	Processing Volun	ne	
Last Month Vol.		#of Ti	ckets		2nd Month Vol.		#of Tickets	
3rd Month Vol.		#of Ti	ckets		4th Month Vol.		#of Tickets	
								_
Owner #1 Name	Kevin Ma	yer		Title	President			
Date of Birth	02.28.196	53		SSN	453-21-29	983		
Full Home Address	806 Cami	no Vista Rio						
Home Phone	(505) 385	-3200 Cel	l Phone	(505) 385-3	200 Email	kmayer@	ointraworksusa.com	
Own/Rent	\$ <u>0 Own</u>	Yea	ars There 50	53853200 D	rivers Lience # 0	27728111	_StateNM	
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address								
Home Phone		Cel	l Phone		Email			
Own/Rent	\$	Yea	ars There	D	rivers Lience # _		State	
Business Home Bas	od?	No Locatio	n: Lease/Own	Owned	Lease Ter	m	Monthly Rent	
		Locatio	ni. Lease/Owii	Owned		-	Monthly Rent	
Landlord / Mortgag	e Co				Cont	act _		
Contact Phone			Cel	<u> </u>		Email		
Bank Name/Branch	NM Ban	k and Trust	Contact			Phone		
Trade Reference#1			— Contact			Phone		
Trade Reference#2			— Contact			— – Phone		
Trade Reference#3			— Contact			— – Phone		
I hereby represent that all	the above in	formation is true and		aking false sta	tements might be con		iding the above information,	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	Kevin Mayer	Date	02/28/2019