

DBA Name	Oxford Designs		Legal Name	Oxford Designs, LLC	
Type of Business	Commercial Furniture Contract and Installation		Tax ID	26-4495695	LLC
Full Business Address	459 North Zebrawood Point				
Full Billing Address					
Phone at Location	(336) 408-5253		Best Phone	(336) 408-5253	Fax
Business Email	oxfdesigns@aol.com		Website	www.oxfordcontractanddesign.com	
Years In Business	10	Average Ticket		Gross Annual Sales	1,457,041.00
Do you currently have cash advance?	Yes	With who?	Kabbage		Balance \$7,375.00
Current Credit Card Processor			Average Processing Volume		
Last Month Vol.		#of Tickets		2nd Month Vol.	
					#of Tickets
3rd Month Vol.		#of Tickets		4th Month Vol.	
					#of Tickets

Owner #1 Name	William Oxford		Title	Owner/Manager	
Date of Birth	29.04.1951		SSN	258--8-4-14	
Full Home Address	459 North Zebrawood Point				
Home Phone	(336) 408-5253	Cell Phone	(336) 408-5253	Email	oxfdesigns@aol.com
Own/Rent	\$ 0 Own	Years There	3	Drivers Lience #	O-21-923-51-149-0 State FL
Owner #2 Name			Title		
Date of Birth			SSN		
Full Home Address					
Home Phone		Cell Phone		Email	
Own/Rent	\$	Years There		Drivers Lience #	State

Business Home Based?	Yes	Location: Lease/Own	Owned	Lease Term	Monthly Rent
Landlord / Mortgage Co.	Quick Turn Properties			Contact	Weston
Contact Phone	(352) 585-3803	Cell		Email	

Bank Name/Branch	Bank of America	Contact		Phone	(888) 287-4637
Trade Reference#1	CD and Associates	Contact	Celita Bullard	Phone	(404) 285-3470
Trade Reference#2	Crago and Associates	Contact	Cheryl Crago	Phone	(336) 207-2249
Trade Reference#3	Design Trade Service	Contact	Frank Goldoni	Phone	(727) 243-8978

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 pertinent 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 above listed business and business owner/officer (individually and collectively, "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 transaction, including without limitation the application therefor (collectively, "Transaction") 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

William Oxford

Date

05/16/2017