MoneyWorks > Direct ADMINISTRATIVE FORM PLEASE FAX	TO:1.646.417.5809
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DBA Name		T's sout	hern kitche	n	Le	egal Name	<u>T'</u>	s southern kit	chen		
Type of Business		Restau	rant		Ta	ax ID	83	1-2230713			LLC
Full Business Addre	:SS	900 hillo	rest school	rd							
Full Billing Address											
Phone at Location		(205) 2	39-6888			Best Phone (205) 23	9-6888	Fax		
Business Email		toya64	58@gmail.c	om		Website	_				
Years In Business		5	A	verage Tick	cet		Gr	oss Annual Sa	les _	130,000.00	
Do you currently ha	ave cash	advance?	N	lo W	ith who? _				Bala	nce	
Current Credit Card Processor						Aver	age Pro	cessing Volum	ie		
Last Month Vol.			#of Ticket	s		2nd Month \	/ol		#of T	ickets	
3rd Month Vol.			#of Ticket	s		4th Month V	/ol		#of T	ickets	
Owner #1 Name	Latoya H	arris			Title	owne	r				
Date of Birth	07/15/81				SSN	420-1	.3-6458				
Full Home Address	472 prair	rie field dri	ve								
Home Phone	(205) 23	9-6888	Cell Pho	ne _	(205) 239-6	888 Email		toya6458	@gmail.c	om	
Own/Rent	\$ <u>0 Ow</u>	n	_ Years T	here 2 ye	ears D	rivers Lience #	15088	364	State	AL	_
Owner #2 Name					Title						
Date of Birth					SSN						
Full Home Address											
Home Phone			Cell Pho	ne _		Email					
Own/Rent	\$		_ Years T	here	D	rivers Lience #	ŧ		State		_
Business Home Bas	sed?	No	Location: L	ease/Own	Leased	Lease	Term		Month	nly Rent	
Landlord / Mortgage	e Co. <u>N</u>	⁄lrs rice				С	ontact	_			
Contact Phone	<u>(</u>	205) 233-	5351	Cell	_			Email			
Bank Name/Branch		na one Cr	édit	Contact	205759	1595		Phone			
Trade Reference#1	union			Contact				_ Phone			
Trade Reference#2				Contact				Phone –			
Trade Reference#3				Contact				Phone _			
I hereby represent that all authorize you to whom thi will provide financial state	s applicatio	n is made or	your agents to	investigate m	ny/our financi	al responsibility	and credit	worthiness, speci	fically prin	cipal and corporate	entities, and

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 La	atoya Harris	Date	11/18/2016
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