

DBA Name		olympic	rei		L	egal N	lame	Rallis	LLC				
Type of Business		Construction			Т	Tax ID		262815937				LLC	
Full Business Addre	:SS	2802 WES	STERLANI	D DR									
Full Billing Address													
Phone at Location		(281) 222-2888			Best Phone (281) 222-2888 Fax								
Business Email		WILRALLIS@HOTMAIL.COM				Website							
Years In Business		10		Average T	icket			Gross	Annual S	ales	250,000	.00	
Do you currently h	ave cash	advance?		Yes	With who?	Swift				Bala	nce <u>900</u>	00	
Current Credit Card Processor Average Processing Volume													
Last Month Vol.			#of Ticke	ets		2nd	Month Vol.			#of T	ickets		
3rd Month Vol.			#of Ticke	ets		4th I	Month Vol.			#of T	ickets		
Owner #1 Name	Will RAlli	s			Title	1	member						
Date of Birth	0413198				_ SSN		465-49-539	92					
Full Home Address		STERLAND [DR		_								
Home Phone	(281) 22	2-2888	Cell Ph	none	(281) 222-2	2888	Email		WILRALL	IS@HOTM	AIL.COM		
Own/Rent	\$ 0 Ow	n	— Years	There 2	812222888	rivers	 Lience #			State	Texa	as	
Owner #2 Name					Title	:							
Date of Birth					SSN								
Full Home Address													
Home Phone			Cell Ph	none			Email —						
Own/Rent	\$		Years	There _		rivers	Lience #			_State	-		
Business Home Bas	sed?	Yes I	Location:	Lease/Ow	n Owned		_Lease Tern	n _		Montl	hly Rent		
Landlord / Mortgage	e Co						Conta	ct	_				
Contact Phone	_			. Ce	ell _			_	Email				
Bank Name/Branch				Contact	i			Ph	one				
Trade Reference#1				Contact	<u></u>			– Ph	one –				
Trade Reference#2				Contact				– Ph	one _				
Trade Reference#3				Contact	t			– Ph	one _				
I hereby represent that all	the above in	nformation is t	rue and unc	derstand that i	making false sta	tement	s might be cons	idered fra	ud. By prov	iding the at	nove inform	nation the ann	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 Na	me Will RAllis	Date	12/19/2016
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