MoneyWorks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Anthony
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DBA Name	Skyspan Wireless			Legal Name		Skv	Skyspan Wireless				
Type of Business Internet Service F					_		27-0067344		LLC		
Full Business Addre	SS	7805 NE 7									
Full Billing Address											
Phone at Location		(816) 214	1-4500			Best Phone			Fax		
Business Email						— Website					
Years In Business		13	Av	erage Tick	cet		Gro	ss Annual	Sales 2	230,000.00	
Do you currently ha	ave cash a	advance?	No) W	ith who? _				Balar	nce	
Current Credit Card Processor Average Processing Volume											
Last Month Vol.			of Tickets			2nd Month Vol	l		#of Ti	ickets	
3rd Month Vol.			of Tickets			4th Month Vol			#of Ti	ickets	
Owner #1 Name	Channan	lones			Title	Owner					
Date of Birth	Shannon 04-16-19	-			Title SSN	Owner 492-66-4	4440				
Full Home Address	7805 NE				3311	432-00-	+++0				
Home Phone	(816) 415		Cell Phon	e		Email		s.iones	@skyspanwi	ireless.com	
Own/Rent	\$ 0 Own		— Years Th	_	D		T98077	•	State	Missouri	
•				-							<u> </u>
Owner #2 Name					Title						
Date of Birth					SSN						
Full Home Address						-					
Home Phone			Cell Phon	e _		Email					
Own/Rent	\$		Years Th	ere	D	rivers Lience #			State		_
Business Home Bas	ed?	Yes L	ocation: Le	ase/Own	Leased	Lease Te	erm		Month	nly Rent	
Landlord / Mortgage	e Co. 1	102 Grand				Con	itact				
Contact Phone	_			Cell	_			Email	_		
Bank Name/Branch	Commu	ınity Ameri	ca C/U	Contact				Phone	(913) 905	5-7000	
Trade Reference#1	Lewis Jo	ones		Contact	Lewis Jo	nes		Phone	(660) 425	5-1800	
Trade Reference#2				Contact				Phone			,
Trade Reference#3				Contact				Phone			

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	Shannon Jones	Date	08/24/2016