MoneyWorks >>	Sales Rep: Joe

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DBA Name TelServ Telecom, LLC			gal Name	Christine Gallucci				
Type of Business		Communica	ations	Ta	ax ID	274548212		LLC
Full Business Addre	ess	28 SERRELL	DR					
Full Billing Address								
Phone at Location	on (201) 391-3225		E	Best Phone		Fax		
Business Email		michael@te	elservnj.com		Website			
Years In Business		8	Average T	icket		Gross Annual Sa	ales <u>10,000.00</u>	
Do you currently ha	ave cash	advance?	No	With who? _			Balance	
Current Credit Card	d Processo	or			Average Processing Volume			
Last Month Vol.		#0	of Tickets		2nd Month Vol.		#of Tickets	
3rd Month Vol.		#c	of Tickets		4th Month Vol.		#of Tickets	
Owner #1 Name	Nicholas	Gallucci		Title	Owner			
Date of Birth	10/06/19	68		_ SSN	133-64-55	02		
Full Home Address	28 Serrel	l Drive						
Home Phone	(201) 391	L-3225	Cell Phone		Email	michael@	otelservnj.com	
Own/Rent	\$ <u>0 Owr</u>	1	Years There	Dı	rivers Lience #		_State <u>NJ</u>	
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address	_							
Home Phone			Cell Phone		Email			
Own/Rent	\$		Years There _	Dı	rivers Lience #		State	
Business Home Bas	sed?	Yes Loc	ation: Lease/Ow	n Owned	Lease Terr	n	Monthly Rent	
Landlord / Mortgage	e Co				Conta	ct _		
Contact Phone	_		C	ell		Email	-	
Bank Name/Branch			Contac			Phone		
Trade Reference#1			Contac	t		– Phone		
Trade Reference#2			Contac	 t		Phone		
Trade Reference#3			Contac			Phone		
I hereby represent that all	the above in	formation is true	and understand that	making false stat	coments might be cons	idered fraud. By provi	iding the above informati	ion 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	Christine Gallucci	Date	08/05/2019