

DBA Name		Fremont Pizzeria of Kingston				gal Name	Fremont Pizzeria of Kingston LLC		
Type of Business		Pizza Shop			Ta	Tax ID		46-5755780	
Full Business Addre	:SS	34 Churc	h Street S	uite 1-2 King	ston NH 03	8848			
Full Billing Address									
Phone at Location		(603) 642-3777			Best Phone (603) 7		3) 706-8267	Fax	
Business Email						Website			
Years In Business		<u>5</u>		Average Ticket			Gross Annua	Sales <u>469,000.00</u>	
Do you currently h	ave cash	advance?		No W	ith who? _			Balance	
Current Credit Card Processor						Average	Processing Vo	lume	
Last Month Vol.			#of Tick	ets		2nd Month Vol.		#of Tickets	
3rd Month Vol.			#of Tick	ets		4th Month Vol.		#of Tickets	
Owner #1 Name	Jason Roo				Title	Owner			
Date of Birth	-	03091972			SSN	020-48-08	368		
Full Home Address		54 Harriman Hill Road							
Home Phone		Cell Phone			(603) 706-8267 Email jayroddapizzaguy@yahoo.d			ldapizzaguy@yahoo.com	
Own/Rent	\$ <u>0 Ren</u>	ıt	_ Years	There 10	Dr	ivers Lience # N	IHI14042188	State NH	_
Owner #2 Name					Title				
Date of Birth					SSN				
Full Home Address Home Phone			Cell Ph	2020		Email			
				_	D.,			Chaha	
Own/Rent	\$			There	U	ivers Lience # _		State	
Business Home Bas	sed?	No	Location:	Lease/Own	Leased	Lease Ter	m	Monthly Rent	
Landlord / Mortgage	e Co. <u>A</u>	anthony A	Reality T	rust		Conta	act	Anthony	
Contact Phone	<u>(</u> !	978) 471-	0103	Cell			Emai	il	
Bank Name/Branch	TD Ban	k		Contact			Phone	(603) 642-3053	
Trade Reference#1				Contact	lan Winte	er	Phone	(603) 793-9698	
Trade Reference#2				Contact	Nick Kak	ouris	Phone	(978) 382-2030	
Trade Reference#3				Contact	Ionis Nio	nakis	— Phone	(978) 836-8277	_
I hereby represent that all	the above in	nformation is	true and und	derstand that ma	king false state	ements might be con	sidered fraud. By n	roviding the above information, th	ne 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.

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Signature#1		Printed Name	Jason Rodriguez	Date	06/11/2019						