

DBA Name		HLHEnterprise of Bennington			_Legal Name		HLHEnterprise of Bennington		
Type of Business		Restaurant			Tax ID		454711421		Corp
Full Business Addre	SS	210 north side	drive						
Full Billing Address									
Phone at Location		(802) 733-4375			Best Phone (802)		733-4375	Fax	
Business Email		ahalkias@ym	ail.com		W	ebsite			
Years In Business		5	Average Tic	ket _			Gross Annual S	390,000.00)
Do you currently have cash advance? Yes With who? Green Boxe and last chance funding Balance									
Current Credit Card Processor Average Processing Volume									
Last Month Vol.		#of ⁻	Γickets		2nd N	onth Vol.		#of Tickets	
3rd Month Vol.		#of ⁻	Γickets		4th N	Ionth Vol.		#of Tickets	
Owner #1 Name	athanasio	s halkias		Titl	le	Owner			
Date of Birth	07-16-19	07-16-1970			SSN 008-48-32		77		
Full Home Address	647 fox h	ill rd		-					
Home Phone	(802) 733	3-4375 C	ell Phone	(802) 733	-4375	Email	ahalkias	s@ymail.com	
Own/Rent	\$ 0 Own	Y	ears There		Drivers I	_ _ience #	-	StateVT	
Owner #2 Name				Titl	le				
Date of Birth				SS	N				
Full Home Address				-					
Home Phone		C	ell Phone			Email			
Own/Rent	\$	Y	ears There		Drivers l	ience #		State	
Business Home Bas	ed?	No Locat	ion: Lease/Own	Lease	d	Lease Term	n	Monthly Rent	
Landlord / Mortgage	e Co. <u>B</u>	IS Benning Ic				Contac	ct	Bruce tamarkian	
Contact Phone	<u>(3</u>	330) 450-7000	Cel	II _			_ Email		
Bank Name/Branch	People I	United bank	Contact				Phone		
Trade Reference#1	Carotto	foods	 Contact				– Phone		
Trade Reference#2	Roma fo	oods	—— 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 relating to any of you, to Money Works Direct and to each of the Recipients, on its own behalf.

Signature#1	Printed Name	athanasios halkias	Date	08/08/2016