MoneyWorks >>	Sales Rep: Julian

DDA Nama		Diana h				l. N		Managialnail	laa.a	
DBA Name							Memorial nail lounge			
Type of Business	Nail salon 9801 long point rd , suite 100, h				Tax ID		680542547		Sole Prop	
Full Business Addre	!SS	9801 lon	g point rd	, suite 100,	houston , t	x //055				
Full Billing Address		(712) 4	60 5555							
Phone at Location		(/13) 4	68-5555			Best Phon			Fax	
Business Email						Websi			450.00	
Years In Business		2017		Average Ti				Gross Annual		
Do you currently h	ave cash	advance?		No	With who? _				Balance	
Current Credit Card	d Process	or				_ A	verage P	rocessing Volu	ıme	
Last Month Vol.			#of Tick	ets		2nd Mon	th Vol.		#of Tickets	
3rd Month Vol.			#of Tick	ets		4th Mont	th Vol.		#of Tickets	
Owner #1 Name	Diane No	guyen			Title -	<u>Ov</u>	wner			
Date of Birth	1804197				SSN -	64	10-70-467	4		
Full Home Address	1111 bla	lock rd apt	204 houst	on tx 77055						
Home Phone	(713) 82	0-1422	Cell Pl	none		En	mail	dianeho	oanguyen@yahoo.com	1
Own/Rent	\$ <u>0 Ow</u>	n	Years	There	D	rivers Liend	ce #		State	
Owner #2 Name					Title -					
Date of Birth					SSN					
Full Home Address										
Home Phone			Cell Pl	none		En	mail			
Own/Rent	\$		_ Years	There	D	rivers Liend	ce #		State	
Business Home Bas	sed?	No	Location:	Lease/Owr	Leased	Lea	se Term		Monthly Rent	
Landlord / Mortgag	e Co.						Contac	t	8322826600	
Contact Phone	_			_ Ce	II			_ Email		
Bank Name/Branch				Contact				Phone		
Trade Reference#1				Contact				- Phone		
Trade Reference#2				Contact				- Phone		
Trade Reference#3				Contact				- Phone		
I hereby represent that all	the above in	nformation is	true and un	derstand that m	naking false sta	tements mid	ht he consi	dered fraud. By pro	oviding the above informa	tion, 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	Diane Nguyen	Date	07/28/2017