

DBA Name	Northcoast o	sis cleaning serv	ice llc. Le	gal Name	Flash drive th	ru		
Type of Business	Grocery store	Grocery store		Tax ID			LLC	
Full Business Address 802 hancock st sandusky ohio,44870								
Full Billing Address								
Phone at Location	(419) 502-00	53	В	Sest Phone (419)	366-2848	Fax		
Business Email	Ahmad_abua	nil@yahoo.com		Website				
Years In Business	10	Average Tick	cet		Gross Annual S	60,000.00		
Do you currently ha	ave cash advance?	No W	ith who? _			Balance		
Current Credit Card	l Processor			Average I	Processing Volu	me		
Last Month Vol.	#of	Tickets		2nd Month Vol.		#of Tickets		
3rd Month Vol.	#of <sup>-</sup>	Tickets		4th Month Vol.		#of Tickets		
Owner #1 Name	Ahmad Abualnil		Title	Bussines o	wner			
Date of Birth	05/05/1967		SSN	300-11-676	54			
Full Home Address	1102ging st sandusky ohio	,44870						
Home Phone	(419) 366-2848 C	ell Phone		Email	ahmad_	ahmad_abualnil@yahoo.com		
Own/Rent	\$ <u>0 Own</u> Y	ears There	Dr	rivers Lience #	State			
Owner #2 Name			Title				_	
Date of Birth Full Home Address			SSN					
Home Phone		ell Phone		Email				
Own/Rent		ears There	Dr	rivers Lience #		State	_	
Business Home Bas	ed? No Locat	ion: Lease/Own	Leased	Lease Term	1	Monthly Rent		
Landlord / Mortgage	e Co. Landlord			 Contac	ct -	 Landlord		
Contact Phone		Cell			_ Email			
Bank Name/Branch	Civista bank	Contact	Water st ohio,448	sandusky 370	Phone	(419) 627-4503		
Trade Reference#1	Qutaiba abualnil	Contact	4195151	1913	— Phone			
Trade Reference#2	Kim edward	 Contact	4193576	5398	— Phone			
Trade Reference#3	Tom eppsi	Contact	4192025	5677	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	Ahmad Abualnil	Date	08/12/2017