MoneyWorks >>	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Steve

DBA Name		Crucible Cloudy	vorks, LLC	Lega	al Name	Crucible Cloudworks	s, LLC
Type of Business CRM Developmer		ent	Tax		46-4316232	LLC	
Full Business Addre	:SS	2856 Dover Land					
Full Billing Address							
Phone at Location		(703) 208-1183		Best Phone		Fa	x
Business Email		cyau@cruciblecloud.com					
Years In Business		5	Average Tick	et		Gross Annual Sales	300,000.00
Do you currently ha	ave cash a	advance?	Yes W	ith who? RO	C Funding	E	Balance <u>16,000</u>
Current Credit Card	d Processo	or			Average	Processing Volume	
Last Month Vol.		#of Tio	ckets	2	nd Month Vol.	#	of Tickets
3rd Month Vol.		#of Tid	ckets	4	Ith Month Vol.	#	of Tickets
Owner #1 Name	Christoph			Title	Technical	Architect	
Date of Birth	02011979	9		SSN	083-88-30	11	
Full Home Address	2856 Dov	er Lane #302					
Home Phone	(703) 635	-5185 Cell	Phone		Email	cyau@crucible	cloud.com
Own/Rent	\$ <u>0 Own</u>	Yea	ers There 10	Driv	ers Lience # A	56108157 State	e <u>Virginia</u>
Owner #2 Name				Title			
Date of Birth				SSN			
Full Home Address							
Home Phone		Cell	Phone		Email		
Own/Rent	\$	Yea	rs There	Driv	ers Lience #	State	e
Business Home Bas	sed?	Yes Locatio	n: Lease/Own	Owned	Lease Terr	nM	onthly Rent
Landlord / Mortgage	e Co				Conta	ct	
Contact Phone	_		Cell			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	formation is true and i	inderstand that mal	king false states	ments might he con-	sidered fraud. By providing the	he above information, the applicant(

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	Christopher Yau	Date	02/01/2018
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