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

DBA Name	Homescapes of Vero			Legal	Name	Homescapes of		
Type of Business		Manufactoring				264576741		Sole Prop
Full Business Addre	ess	385 28th Ct SV						<u> </u>
Full Billing Address								
_		(772) 321-7503		Best	Phone (772)	321-6503	Fax	(775) 563-2625
Business Email		Homescapesofvero@yahoo.com		m	Website	Www.facebook.com/homescapesofvero		
Years In Business		2	Average Tick	icket		Gross Annual Sales 190,000.00		
Do you currently h	ave cash a	advance?	Yes W	ith who? Lend	lio		Balan	ce <u>1700</u>
Current Credit Card	d Processo	r			Average	Processing Volu	me	
Last Month Vol.		#of T	ickets	2n	d Month Vol.		#of Tid	ckets
3rd Month Vol.		—— #of T	ickets		n Month Vol.		#of Tio	ckets
Owner #1 Name	Denise W	oolley		Title	Owner			
Date of Birth	01-05-196	55		SSN	264-57-674	11		
Full Home Address	385 28th	Ct SW						
Home Phone	(772) 321	-6503 Ce	II Phone		Email	homesc	apesofvero@	gyahoo.com
Own/Rent	\$ <u>0 Own</u>	Ye	ears There 15	Drive	rs Lience # W	400164655050	State	Florida
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address								
Home Phone			II Phone –		Email			
Own/Rent	\$	Ye	ears There	Drive	rs Lience #		State	
Business Home Bas	sed?	Yes Locati	on: Lease/Own	Owned	Lease Tern	າ	Monthl	y Rent <u>0.00</u>
Landlord / Mortgag	e Co				Conta	ct		
Contact Phone	_		Cell			_ Email		
Bank Name/Branch	Wells Fa	argo	Contact			Phone		
Trade Reference#1			 Contact	-		– Phone		_
Trade Reference#2			 Contact			– Phone		
Trade Reference#3			 Contact			– Phone		
I hereby represent that all	the above int	formation is true and	Lunderstand that ma	king false stateme	ents might he cons	idered fraud. By pro	viding the abo	ve information, 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	Denise Woolley	Date	08/23/2016