

DBA Name	Diko A Diko DDS		Legal Name	Diko A Diko DDS	
Type of Business	Dental Office		Tax ID	201078657	Sole Prop
Full Business Address	3848 MCHENRY AVE. #130, Modesto CA 95356				
Full Billing Address					
Phone at Location	(209) 523-2100		Best Phone	(209) 480-9524	Fax (209) 523-2101
Business Email	javahar.g@dolphinltd.com		Website	none	
Years In Business	14	Average Ticket		Gross Annual Sales	1,009,260.00
Do you currently have cash advance?	No	With who?		Balance	
Current Credit Card Processor			Average Processing Volume		
Last Month Vol.		#of Tickets		2nd Month Vol.	
					#of Tickets
3rd Month Vol.		#of Tickets		4th Month Vol.	
					#of Tickets

<b>Owner #1 Name</b>	DIKO DIKO		Title	Sole Proprietor	
Date of Birth	01-14-1940		SSN	331-94-3202	
Full Home Address	3125 Lander Ave, Turlock CA 95380				
Home Phone	(209) 523-2100	Cell Phone	(209) 480-9524	Email	javaharg@yahoo.co.in
Own/Rent	\$ 0 Own	Years There	2015	Drivers Lience #	State CA
<b>Owner #2 Name</b>			Title		
Date of Birth			SSN		
Full Home Address					
Home Phone		Cell Phone		Email	
Own/Rent	\$	Years There		Drivers Lience #	State

Business Home Based?	No	Location: Lease/Own	Leased	Lease Term	Monthly Rent
Landlord / Mortgage Co.	Phillips Edison & Co.			Contact	Beth Hunt
Contact Phone	(513) 619-5039	Cell		Email	bethhunt@PHILLIPSEDISON.com

Bank Name/Branch	Bank Of America, Modesto	Contact	Branch Manager	Phone	(209) 341-1724
Trade Reference#1		Contact		Phone	
Trade Reference#2		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 pertinent 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 above listed business and business owner/officer (individually and collectively, "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 transaction, including without limitation the application therefor (collectively, "Transaction") 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	DIKO DIKO	Date	11/15/2017
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