

DBA Name		Primerica Financial Services			Legal Name		R & G Management					
Type of Business		Insurance & Investments			Tax ID		233062512	233062512		Sole Prop		
Full Business Address 112 N Courtland Street Ste. 4 Esat Stroudsburg, PA 18301												
Full Billing Address												
Phone at Location (570) 420-9000				Ве	st Phone (570)	977-4111	Fax	(570)	420-8036			
Business Email rstigpri@gmail.co			@gmail.co	m Website			rstigliano.pbb22@primerica.com					
Years In Business	24			Average Ticket		Gross Annual Sales 223,000.00			)			
Do you currently ha	ave cas	h advance?	,	Yes W	ith who? Mo	oney Works Dire	ct	_ Bala	nce <u>17,07</u>	8		
Current Credit Card Processor Average Processing Volume												
Last Month Vol.			#of Ticke	ets	2	2nd Month Vol.		#of T	ickets			
3rd Month Vol.			#of Ticke	ets		4th Month Vol.		#of T	ickets			
Owner #1 Name	Rocco	Stigliano			Title	Owner						
Date of Birth	09/04/2				SSN	Roc-54-918	82					
Full Home Address	1741 S	Gullivan Trail										
Home Phone	(570) 9	977-4111	Cell Ph	one (	570) 977-41:	11 Email	rstigp	ri@gmail.con	า			
Own/Rent	\$ 0 Own Years There			There 25	25 Drivers Lience # 243			State	Penns	ylvania		
Owner #2 Name					Title							
Date of Birth					SSN							
Full Home Address												
Home Phone			Cell Ph	one _		Email						
Own/Rent	\$		_ Years	There	Driv	vers Lience #		State				
Business Home Bas	sed?	No	Location:	Lease/Own	Leased	Lease Tern	n 20 mont	ths Month	nly Rent	3,625.00		
Landlord / Mortgage	e Co.	Sam D'alle	ssandro			Conta	ct	Sam D'ale	essandro			
Contact Phone		(570) 656-	3391	Cell	<u>(57</u>	0) 626-3391	Emai	ı				
Bank Name/Branch	NBT E	Bank		Contact	Jill Bauer		Phone	(570) 423	l-1122			
Trade Reference#1 DES Shredding			Contact	Catherina Shay		 Phone	(570) 423	L-2912				
Trade Reference#2 Staples			Contact	Store Mar	nager	Phone	(570) 420	(570) 420-0600				
Trade Reference#3	eference#3 Blue Ridge Cable			Contact	Customer	Service	 Phone 	(888) 665	5-2321			
I horoby roprocont that all	the above	information is	true and und	erstand that mak	ring falso state	monts might be sens	idered fraud. By n	royiding the ab	ovo informat	ion 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.

o any or all of the Recipie	so authorize Money Works Direct to transmit th ents for the foregoing purposes. You also cons of the Recipients, on its own behalf.				
Signature#1		Printed Name	Rocco Stigliano	Date	08/09/2018