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

DBA Name		JREG Holdings I	1C		gal Name	JREG Holdings I	LIC	
Type of Business		Property Manag			ax ID	264601191		LLC
Full Business Addre	icc	P.O. Box 480	gernene			201001131		_
Full Billing Address	.33	1.0. 000 400						
Phone at Location		(267) 475-3929)		est Phone (267)	475-3929	Fax	(856) 832-4507
Business Email		emg5157@gmail.com		Website			. ux	(656) 652 1561
Years In Business		9	Average Tick	cet				0,000.00
Do you currently h	avo cash :							e
			NO W	/icii wiio: _				= <u> </u>
Current Credit Card	rocesso	or				Processing Volun	ne _	
Last Month Vol.		#of Tio	ckets		2nd Month Vol.		#of Tick	:ets
3rd Month Vol.		#of Tio	ckets		4th Month Vol.		#of Tick	cets
Owner #1 Name	Evan Gra	ham		Title	owner			
Date of Birth	05-15-19	84		SSN	136-86-26	33		
Full Home Address	P.O. Box	480 Mickleton NJ 08	3056					
Home Phone	(267) 475	5-3929 Cell	Phone	(267) 475-3	929 Email	emg5157	@gmail.com	1
Own/Rent	\$ <u>0 Own</u>	Yea	ars There 2	Dr	rivers Lience # G	71542527405844	_State	NJ
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address								
Home Phone		Cell	Phone		Email			
Own/Rent	\$	Yea	ars There	Dr	rivers Lience #		_State	
Business Home Bas	sed?	Yes Location	n: Lease/Own	Owned	Lease Terr	n	Monthly	Rent
		Locatio	ni. Lease, own	<u> </u>				
Landlord / Mortgag	e Co				Conta			
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	understand that ma	king falso stat	coments might be con-	sidered fraud. By provi	iding the above	n 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 relating to any of you, to Money Works Direct and to each of the Recipients, on its own behalf.

Signature#1	Printed Name	Evan Graham	Date	03/09/2017