

DBA Name	Capital Consulting Services		Legal Name	Capital Consulting Services	
Type of Business	Management Consulting Services		Tax ID	800659807	Corp
Full Business Address	3221 McKelvey Road, Ste 292, Bridgeton MO 63044				
Full Billing Address					
Phone at Location	(314) 690-1672		Best Phone		Fax
Business Email	tjeffries@capitalconsultingservices.com		Website	www.capitalconsultingservices.com	
Years In Business	10	Average Ticket		Gross Annual Sales	480,000.00
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.	
3rd Month Vol.		#of Tickets		4th Month Vol.	

Owner #1 Name	Tracey Jeffries		Title	Owner	
Date of Birth	11081971		SSN	489-78-7955	
Full Home Address	1520 Flamingo Drive, Florissant, MO 63031				
Home Phone	(314) 718-4074	Cell Phone	(314) 718-4074	Email	tjeffries@capitalconsultingservices.com
Own/Rent	\$ 0 Own	Years There	10	Drivers Lience #	489787955
				State	Missouri
Owner #2 Name			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	60 months	Monthly Rent	4,000.00
Landlord / Mortgage Co.	Saint Louis Community College			Contact	314-513-4200		
Contact Phone		Cell		Email			

Bank Name/Branch	Providence Bank	Contact		Phone	(636) 916-0226
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 aboe listed business and business owenet/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 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 informaiton 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	Tracey Jeffries	Date	10/17/2016
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