

DBA Name	U.S. LING INSTITUTE		Legal Name	U.S. LING INSTITUTE	
Type of Business	EDUCATION		Tax ID	87-0659265	Corp
Full Business Address	4516 South 700 East #265, MURRAY, UT 84107				
Full Billing Address					
Phone at Location	(801) 269-1311		Best Phone	(801) 577-7200	Fax (801) 262-4924
Business Email	narine@usling.org		Website	www.usling.edu	
Years In Business	17	Average Ticket		Gross Annual Sales	785,000.00
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.	

<b>Owner #1 Name</b>	Narine Sarkissian		Title	PRESIDENT	
Date of Birth	04/05/1960		SSN	646-16-4473	
Full Home Address	5390 S Holladay Blvd. SALT LAKE CITY, UT 84117				
Home Phone	(801) 577-7200	Cell Phone	(801) 577-7200	Email	narasarkissian@hotmail.com
Own/Rent	\$ 0 Own	Years There	10	Drivers Lience #	154351357 State Utah
<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.	ASPENWOOD PARK			Contact	SHAWN FREEMAN
Contact Phone	(801) 270-8800	Cell	(801) 270-8800	Email	

Bank Name/Branch	WELLS FARGO BANK	Contact	DONNA ROARK	Phone	(385) 243-9100
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	NARINE SARKISSIAN	Date	12/06/2017
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