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

DBA Name		Socialwa	hor		l a	agal Nai		Poton	t Dotontia	ol inc		
	Socialweber Digital Marketing				Legal Name			Potent Potential inc. 45-4846047			Corn	
Type of Business		Digital Marketing 34 Franklin Avenue 303		1	Tax ID		43-40	40047			Corp	
Full Business Addre	SS	34 Frank	in Avenue	303								
Full Billing Address		(74.0) 45								Fax	(740)	475.1660
Phone at Location		(718) 475-1655								(718)	475-1662	
Business Email		Support@socialweber.com				Website		Socialweber.com				
Years In Business		6		verage Ti	cket				Annual S	ales $\frac{1}{2}$.00,000.0	0
Do you currently ha	ave cash	advance?	1	No '	With who? _					Balar	nce	
Current Credit Card	d Process	or	-			_	Average	Process	ing Volur	me		
Last Month Vol.			#of Ticket	is		2nd M	onth Vol.			#of Ti	ckets	
3rd Month Vol.			#of Ticket			4th Mo	onth Vol.			#of Ti	ckets	
Owner #1 Name	Sholem B	Berkowitz			Title	<u> </u>	Prrsident					
Date of Birth	09/02/78				- SSN		123-62-56	540				
Full Home Address	13 Hamb	urg Way 20)3		-							
Home Phone	(845) 774	4-3314	Cell Pho	ne	(845) 659-6	5166	Email		sholemb	@me.com		
Own/Rent	\$ 0 Ren	t	 Years T	here 3	D	rivers Li	ence # <u>1</u> 9	9068713	4	State	NY	
O #2 No					T:41-							
Owner #2 Name Date of Birth					Title - SSN							
Full Home Address					- -							
Home Phone			Cell Pho	one			Email					
Own/Rent	\$		Years T		D	rivers Li				State		
Business Home Bas	ed?	No	Location: I	eace/Own	Leased	I	ease Terr	m 1		Month	ly Rent	1,200.00
		110	Location. I	_ease/Own	Leasea			_			iy iveric	1,200.00
Landlord / Mortgage	e Co						Conta	act	-			
Contact Phone	_			Ce	<u> </u>				Email			
Bank Name/Branch	Chase /	' Brooklyn		Contact		_		Ph	ione _			
Trade Reference#1				Contact				Ph	ione			
Trade Reference#2				Contact			_	Ph	ione			
Trade Reference#3				Contact				— Ph —	ione _			
I haraby raprocent that all	the above in	formation is	true and unde	retand that m	asking falso sta	tomonto r	might he con	cidorod fr	ud Dy prov	iding the sh	ovo informa	tion the annlicent/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.

Signature#1 Printe	ed Name Sholem B	erkowitz Da	ate 1	11/29/2017
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