

DBA Name			care & janitor	ial servic		egal Name		oor care & ja	nitorial	services	
Type of Business		Janitoria			Ta	ax ID	45-50	52139		_	Corp
Full Business Addre	SS	579 lande	en st se Bolivia	NC 2842	22						
Full Billing Address		-									
Phone at Location		(910) 54	0-5499			Best Phone		F	ax		
Business Email						Website					
Years In Business		6	Avera	age Ticke	et		Gross /	Annual Sales	110	0,000.00	
Do you currently ha	ave cash	advance?	No	Wit	th who? _				Balance	e	
Current Credit Card	d Process	or				Average	Process	ing Volume	_		
Last Month Vol.			#of Tickets			2nd Month Vol.			#of Tick	cets	
3rd Month Vol.			#of Tickets			4th Month Vol.			#of Tick	cets	
											1
Owner #1 Name	Mike Kap				Title						
Date of Birth	01251971 SSN 136-60-4046 579 landen st SE Bolivia NC 28422										
Full Home Address								"			
Home Phone	(910) 540		Cell Phone	_		Email		mikekap@ati			
Own/Rent	\$ <u>0 Owr</u>	1	Years There	6	D	rivers Lience # 7	7990191	Sta	ate	<u>Nc</u>	
Owner #2 Name					Title						
Date of Birth					SSN						
Full Home Address											
Home Phone			Cell Phone			Email					
Own/Rent	\$		Years There		D	rivers Lience #		Sta	ate		
Business Home Bas	ed?	Yes	Location: Leas	e/Own	Owned	Lease Ter	m		Monthly	Rent	
						Cont			,		
Landlord / Mortgage	_					Conta	act				
Contact Phone				Cell	_		_	Email			
Bank Name/Branch	Bb&t		Co	ntact			Ph	one			
Trade Reference#1			Co	ntact			— Ph	one			
Trade Reference#2			Co	ntact			— Ph	one			
Trade Reference#3			Co	ntact			Ph	one			
					-						

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	Printed Name	Mike Kapushinsky	Date	12/22/2016