

DBA Name	Cramer	Legal Name	SCC
Type of Business	The money Type	Tax ID	5555454542 Corp
Full Business Address	1600 Amphitheatre Parkway		
Full Billing Address			
Phone at Location	(650) 253-0000	Best Phone	(650) 253-0000 Fax
Business Email	c@gmail.com	Website	c.com
Years In Business	100	Average Ticket	Gross Annual Sales 3,000,000.00
Do you currently have cash advance?	Yes	With who?	Larry Page Balance 0
Current Credit Card Processor	American Express	Average Processing Volume	250
Last Month Vol.	0	#of Tickets	2nd Month Vol. 0 #of Tickets
3rd Month Vol.	0	#of Tickets	4th Month Vol. 0 #of Tickets

<b>Owner #1 Name</b>	Cromatose Cromatada	Title	Senhor
Date of Birth	0000-00-00	SSN	222-22-2222
Full Home Address	( 98052 )1600 Amphitheatre Parkway Mountain View, CA 94043		
Home Phone	(222) 222-2222	Cell Phone	Email cromosdo.cosmos@gmail.com
Own/Rent	\$ 0 Own	Years There	Drivers Lience # State
<b>Owner #2 Name</b>		Title	
Date of Birth	0000-00-00	SSN	--
Full Home Address			
Home Phone		Cell Phone	Email
Own/Rent	\$ Own	Years There	Drivers Lience # State

Business Home Based?	Yes	Location: Lease/Own	Owned	Lease Term	0	Monthly Rent	500,000.00
Landlord / Mortgage Co.				Contact			
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 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	Cromatose Cromatada	Date	06/14/2016
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