

DBA Name		Express Lawn Care Services Lawn Care			Le	Legal Name Tax ID		Express Lawn Care Services		
Type of Business								81-2238905		Sole Prop
Full Business Addre	SS	123 Dors								
Full Billing Address			<u> </u>							
Phone at Location		(724) 83	33-3147			Best Phone		Fax	· · · · · · · · · · · · · · · · · · ·	
Business Email						Website		_		
Years In Business		3		Average Ti	cket		Gross Ann	ual Sales	30,000.00	
Do you currently h	ave cash	advance?		_	— With who?	_		В	-1	
Current Credit Card					_					
	rocess	or				-	e Processing			
Last Month Vol.			#of Ticke	ets		2nd Month Vol.		#0	of Tickets	
3rd Month Vol.	-		#of Ticke	ets		4th Month Vol.		#0	of Tickets	
Owner #1 Name	Benjamir	) Witte			Title	Owner				
Date of Birth	0105198	4			SSN -	220-06-1	149			
Full Home Address	123 Dors	ey Ave Bro	wnsville PA	15417						
Home Phone	(724) 83	3-3147	Cell Ph	none		Email	ex	presslawncs(	gmail.com	
Own/Rent	\$ <u>0 Owr</u>	\$ 0 Own Years There		There _	Drivers Lience #			State		
Owner #2 Name					Title					
Date of Birth					SSN					
Full Home Address										
Home Phone			Cell Ph	none		Email				
Own/Rent	\$		Years	There _	D	rivers Lience #		State		
Business Home Bas	ed?	Yes	l ocation:	Lease/Owr	n Owned	Lease Ter	rm	Mc	onthly Rent	
			200410111	zease, o m						
Landlord / Mortgage	e Co					Cont	act			
Contact Phone	_			. Ce	ell		En	nail		
Bank Name/Branch				Contact			Phone	<u> </u>		
Trade Reference#1				Contact			— Phone			
Trade Reference#2				Contact			— Phone			
Trade Reference#3				Contact			— Phone	-		
I hereby represent that all	the above ir	nformation is	true and und	derstand that n	making false sta	tements might be co	nsidered fraud. E	By providing th	e above information	n, the applicant(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	Printed Name	Benjamin Witte	Date	07/25/2017