

DBA Name	non	Legal Name	Label Solution	
Type of Business	Printing	Tax ID	270982021	LLC
Full Business Address	16 Johanna Ln			
Full Billing Address				
Phone at Location	(845) 517-0755	Best Phone	(845) 323-8722	Fax
Business Email	krauszisraelck@gmail.com	Website	labelsolutionny.com	
Years In Business	3	Average Ticket		Gross Annual Sales 750,000.00
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.	# of Tickets
3rd Month Vol.		# of Tickets	4th Month Vol.	# of Tickets

Owner #1 Name	Israel Krausz	Title	President
Date of Birth	04/11/1979	SSN	103-80-8260
Full Home Address	6 Johanna Ln		
Home Phone	(845) 517-0755	Cell Phone	(845) 323-8722
		Email	krauszisraelck@gmail.com
Own/Rent	\$ 0 Own	Years There	3
		Drivers Lience #	798250694
		State	NY
Owner #2 Name		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	5 Years	Monthly Rent	600.00
Landlord / Mortgage Co.				Contact			
Contact Phone		Cell		Email			

Bank Name/Branch	Wells Fargo	Contact		Phone	(800) 225-5935
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	Israel Krausz	Date	08/16/2017
_____	_____	_____	_____	_____