

DBA Name	The Caraway Firm	Legal Name	The Caraway Firm, Accountants & Tax Consultants, Inc.	
Type of Business	Public Accounting	Tax ID	83-1403458	Corp
Full Business Address	5651 Whitesville Rd., Ste. 109, Columbus, GA 31904			
Full Billing Address				
Phone at Location	(706) 576-5111	Best Phone	(706) 576-5111	Fax (706) 576-9969
Business Email	flanaganvj@gmail.com	Website	carawayfirm.com	
Years In Business	33	Average Ticket		Gross Annual Sales 285,000.00
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

<b>Owner #1 Name</b>	Vicki Flanagan	Title	CEO
Date of Birth	12/24/1946	SSN	260-68-9772
Full Home Address	4128 King Arthur Place		
Home Phone	(706) 580-5590	Cell Phone	(706) 580-5590
Email	thecarawayfirm@gmail.com		
Own/Rent	\$ 0 Own	Years There	30
Drivers Lience #	056321568	State	GA
<b>Owner #2 Name</b>		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	3 YEARS W/OPTIONS	Monthly Rent	1,550.00
Landlord / Mortgage Co.	The Arbor, LLC			Contact	706-561-7940		
Contact Phone		Cell		Email			

Bank Name/Branch	NAVY FEDERAL CREDIT UNION	Contact	SAM (BRANCH MANAGER)	Phone	(888) 842-6328
Trade Reference#1	QUILL	Contact	ACCOUNTS PAYABLE	Phone	(800) 982-3400
Trade Reference#2	PARTAIN MARKETING	Contact	ED PARTAIN	Phone	(706) 888-1756
Trade Reference#3	BANNER BLDGS OF COLUMBUS	Contact	JON HARALSON	Phone	(706) 568-0500

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

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Printed Name

Vicki Flanagan

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Date

10/17/2018

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