

DBA Name		gulf states drilling supply llc			Legal Name		G.S.D.S.				
Type of Business		construstion supply			T	ax ID	47-377486	56	LLC		
Full Business Addres	ss <u>2</u>	18 temp	le rd petal	ms 39465							
Full Billing Address											
Phone at Location	on <u>(601) 270-6246</u>				В	est Phone (60	01) 270-6246	Fax	(713) 969-4806		
Business Email	SA	SALES@GULFSTATESD			UPPLY.COM	Website	Gulfstate	sdrillingsupply	/.com		
Years In Business	1	0	A	verage Tic	ket		Gross Annu	oss Annual Sales 500,000.00			
Do you currently ha	ve cash adv	ance?	No	Wi	th who?			Balance			
Current Credit Card Processor Average Proces							ge Processing \	/olume			
Last Month Vol.			#of Ticket	s		2nd Month Vo	ol	#of T	ickets		
3rd Month Vol.			#of Ticket	s		4th Month Vo	il	#of T	ickets		
Owner #1 Name	STEVE STRI	CKI AND			Title	preside	nt				
Date of Birth	11/54/1961				SSN	428-21-					
Full Home Address	22 GREEN B	SAY DR pe	tal ms 3946	 55	3311						
Home Phone	(601) 270-6		Cell Pho		(601) 270-6	246 Email	SAL	ES@GULFSTATE	ESDRILLINGSUPPLY.COM		
Own/Rent	\$ 0 Own		— Years T			rivers Lience #	802543820	State	mississippi		
Owner #2 Name					Title						
Date of Birth					SSN						
Full Home Address											
Home Phone			Cell Pho	ne		Email					
Own/Rent	\$		Years T	here	D	rivers Lience #		State			
Business Home Bas	ed? N	lo L	ocation: L	.ease/Own	Owned	Lease T	erm	Month	ly Rent		
Landlord / Mortgage	e Co.					Coi	ntact				
Contact Phone			_	Cel	l		Em	nail			
Bank Name/Branch	hancoch v ms	whitney/	petal	Contact			Phone	e (601) 58	4-8192		
Trade Reference#1	Southern	drilling		Contact	Bruce w	oods .	—— Phone	(601) 81	0-0151		
Trade Reference#2	Roc doctor Conta			Contact	David n	naechler	—— Phone	(615) 23	8-4641		
Trade Reference#3	Terrys bit	S		Contact	Randall	terry	Phone	(601) 44	1-4114		
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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	STEVE STRICKLAND	Date	11/15/2019