MoneyWorks Direct ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809	
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DBA Name	Casa Diaz Cafe			Le	gal Name	JID LLC	JID LLC		
Type of Business	Restaurant			 Ta	x ID	811975335		LLC	
Full Business Address	S	567 S Ca	ımino Del I	Pueblo					_
Full Billing Address									
Phone at Location	(505) 433-4135			Best Phone (505) 688-3589 Fax					
Business Email		casadiazgrill@gmail.com				Website	www.casadia		
Years In Business		1	1 Average Ticket				Gross Annual Sales 230,000.00		
Do you currently hav	ve cash	advance?		No W	ith who? _			Balance	2
Current Credit Card I	Process	sor				Average	Processing Volu	ume _	
Last Month Vol.			#of Ticke	ets		2nd Month Vol.		#of Tick	ets
3rd Month Vol.			#of Ticke	ets		4th Month Vol.		#of Tick	ets
Owner #1 Name	Irma Dia	97			Title	Owner			
-	05101969				SSN 585-23-0260				
Full Home Address	412 Mary Hill Rd								
Home Phone ((505) 433-3135 Cell Phone (505) 688-3589 Email dmjm34@gmail.com								
Own/Rent	\$ <u>0</u> Ow	0 Own Years There 3			Dr	Drivers Lience # 033227591 State NEW MEXICO			
Owner #2 Name					Title				
Date of Birth —					SSN				
Full Home Address —									
Home Phone —		Cell Phone				Email			
Own/Rent	\$		_ Years	There	Dr	ivers Lience # _		State	
Business Home Based	ed?	No	Location:	Lease/Own	Owned	Lease Ter	m	Monthly	Rent
Landlord / Mortgage	Co.	Acquired C	Capitol			Cont	act	Ed Herberna	r
Contact Phone		(281) 265-	5328	Cell	(2)	81) 265-5328	Email	ed@k	eystar.com
Bank Name/Branch	Bank o	of America		Contact	Martin		Phone	(800) 432-1	000
Trade Reference#1	Shamrock Food Contact			Juan		 Phone	(505) 345-4488		
Trade Reference#2	ence#2 Sysco Contact			Contact	Richard		Phone	(505) 761-1200	
Trade Reference#3	Coca C	Coca Cola Contact			Mike		Phone	(800) 491-2	042

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		Date	07/17/2017
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