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DBA Name		J.B.'S Smokehouse			_Legal Name		J.B.'S Rib & Steakhouse LLC		
Type of Business		restaurant			_Tax ID		473776130		LLC
Full Business Addre	SS	211 Main Str	eet East Roch	nester, 14445					
Full Billing Address									
Phone at Location		(585) 485-0983			Best Phone <u>(585)</u>		233-8005	Fax	
Business Email		jbsmokehou	useny@gmail.	com	Websit	e	jbsmokehouse.d	com	
Years In Business		1.3	_ Averag	e Ticket			Gross Annual Sa	les <u>430,000.00</u>	
Do you currently ha	ave cash	advance?	Yes	With who	? imperial fur	nding		Balance <u>12,000</u>	<u> </u>
Current Credit Card	d Process	sor			Av	/erage	Processing Volum	ne	
Last Month Vol.		#o	f Tickets		2nd Mont	h Vol.		#of Tickets	
3rd Month Vol.		#o	f Tickets		4th Month	h Vol.		#of Tickets	
Owner #1 Name	william					ner			
Date of Birth	01/14/19				SN 074	4-72-250	08		
Full Home Address	483 Fetz	zner Road Roche	ster, NY 14626	i 					
Home Phone	(585) 23	33-8005	Cell Phone	(585) 23	3-8005 Em	nail	jbsmokeh	ousny@gmail.com	
Own/Rent	\$ <u>0 Ow</u>	n	Years There	14 years	_Drivers Lience	e# <u>57</u>	72-031-169	State ny	
				_					
Owner #2 Name					tle				
Date of Birth					SN				
Full Home Address			Call Dhana		F	:1			
Home Phone			Cell Phone		Em				
Own/Rent	\$		Years There		_Drivers Lience	e #		State	
Business Home Bas	ed?	No Loc	ation: Lease/0	Own <u>Leas</u>	ed Leas	se Tern	n	Monthly Rent	
Landlord / Mortgage	e Co. <u> </u>	Babootz Holdii	ng		_	Conta	ct <u>M</u>	ark Barberlo	
Contact Phone	<u>(</u>	(585) 738-429	5	Cell	(585) 738-42	295	Email		
Bank Name/Branch			Cont	tact			Phone		
Trade Reference#1			Cont	tact			Phone —		
Trade Reference#2			 Cont	tact			–		
Trade Reference#3			 Cont	tact			–		
I hereby represent that all	the above i	nformation is true	and understand t	hat making false	statements migh	t be cons	idered fraud. By provid	ding the above information	on, 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	william Schnupp	Date	09/07/2017