Money Works Direct ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.586
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DBA Name		Comple	te Masonry	/	Lega	Name	Ammaron Piu	tau		
Type of Business Masonry			<u> </u>	Tax ID		81-5034118		Sole Prop		
Full Business Address 55-009 Kamehameha Hwy Apt A Laie HI 96762									33.31.35	
Full Billing Address	55					-				
Phone at Location										
Business Email	number1masonry(·				
Years In Business				verage Ticket			Gross Annual	Sales 400,000.00		
Do you currently ha	ave cash a	advance?						Balance		
Current Credit Card Processor Average Processing Volume										
Last Month Vol.			#of Ticke	ts	 2n	d Month Vol.		#of Tickets		
3rd Month Vol.			#of Ticke	ts ——	 4t	h Month Vol.		#of Tickets		
Owner #1 Name	Ammaron	Piutau			Title	Owner				
Date of Birth	10/15/198	34			SSN	576-45-53	376			
Full Home Address	55-009 Kamehameha HWY Apt A Laie HI 96762									
Home Phone	(808) 364	-6247	Cell Ph	one (808) 364-6247	Email	numbe	r1masonry@gmail.com		
Own/Rent	\$ 0 Rent	t	Years ⁻	There 30 y	ears Drive	rs Lience # 2	016-108428	State HI		
Owner #2 Name					Title					
Date of Birth					SSN					
Full Home Address										
Home Phone			Cell Ph	one _		Email				
Own/Rent	\$		_ Years ⁻	There	Drive	rs Lience #		State		
Business Home Bas	ed?	Yes	Location:	Lease/Own	Leased	Lease Terr	m	Monthly Rent		
Landlord / Mortgage	 e Co.		-			— Conta	act			
Contact Phone	_			Cell			Email			
Bank Name/Branch	America	an Saving	s Bank	Contact			Phone			
Trade Reference#1	Kimo's	equipmer	nt Rentals	Contact	Kimo (own	er)	Phone	(808) 291-4746		
Trade Reference#2	Laie Tru	ıcking		Contact	Mike (own	er)	Phone	(808) 293-8710		
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 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	Ammaron Piutau	Date	08/23/2017
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