Money Works Direct ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.58	309
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DBA Name Larry Henderson CPA	Legal Name Larry Henderson CPA LLC		
Type of Business CPA Firm	Tax ID LLC		
Full Business Address 111 SW 5th Avenue			
Full Billing Address			
Phone at Location (503) 894-8380	Best Phone (541) 207-2817 Fax (866) 373-9339		
Business Email larry@hendersoncpas.com	Website hendersoncpas.com		
Years In Business <u>6</u> Average Ticket	Gross Annual Sales 400,000.00		
Do you currently have cash advance? No With w	o? 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		
Owner #1 Name Larry Henderson	Title President		
Date of Birth 24-11-1956	SSN 575-72-7548		
Full Home Address 5455 Remington Road			
Home Phone (503) 867-5946 Cell Phone (503)	667-5946 Email rynnih@yahoo.com		
Own/Rent \$ 0 Own Years There 1	Drivers Lience # 7993106 State OR		
Owner #2 Name	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 Le	sed Lease TermMonthly Rent		
Landlord / Mortgage Co. Unico	Contact Amy Delbrouck		
Contact Phone (503) 275-6437 Cell	Emailamy@unicoprop.com		
Bank Name/Branch Chase Bank Contact	Phone (503) 238-3100		
Trade Reference#1 Lacerte Contact Cra	g O'Dell Phone (800) 446-8848		
Trade Reference#2 Cloud Nine Contact Pau	I Phan Phone (888) 869-0076		
Trade Reference#3 Ring Central Contact	Phone (877) 370-8000		

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.

06/01/2017