MoneyWorks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Carl
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DBA Name		1967			Le	gal Name	1967			
Type of Business	Accounting Office				Tax ID		90-0127783		LLC	
Full Business Addre	SS		hestnut A							
Full Billing Address										
Phone at Location		(856) 6	92-3422		Е	Sest Phone (85	6) 313-0717	Fax	(609)	482-8274
Business Email		lagattapros@yahoo.com			Website		none			
Years In Business		9		Average Tic	ket		Gross Annual	Sales 1	.09,000.0	0
Do you currently ha	ave cash	advance?		Yes V	Vith who? S	WIFT CAPITAL		Balar	nce <u>10,00</u>	0
Current Credit Card	d Processo	or				Averag	e Processing Vol	ume		
Last Month Vol.			#of Tick	ets		2nd Month Vol		#of Ti	ckets	
3rd Month Vol.			#of Tick	ets		4th Month Vol.		#of Ti	ckets	
Owner #1 Name	Maritza T	orres			Title	CFO				
Date of Birth	03/15/19				SSN	028-58-8				
Full Home Address	536 Amo				3314					
Home Phone	(856) 692		Cell P	hone	(856) 313-0	717 Email	lagatta	apros@yahoo	.com	
Own/Rent	\$ 0 Owr	1	—— Years	There 23	D	rivers Lience #	 T6646519005367		NJ	
			_			•				
Owner #2 Name					Title					
Date of Birth					SSN					
Full Home Address										
Home Phone			Cell P	hone		Email				
Own/Rent	\$		_ Years	There	D	rivers Lience #		State		
Business Home Bas	ed?	No	Location	: Lease/Own	Leased	Lease Te	rm <u>15 years</u>	Month	ly Rent	1,000.00
Landlord / Mortgage	e Co. <u>D</u>	r. Ronald	Marizon			Con	tact	unlisted		
Contact Phone	_			_ Cel	l		Emai			<u> </u>
Bank Name/Branch	Bank of	America		Contact	Maria G	utierrez	Phone			
Trade Reference#1	Pitney I	Bowes		Contact			Phone			
Trade Reference#2	Watchu	ng Water	Delivery	- Contact	-		Phone			
Trade Reference#3	South J	ersey Gas	<u> </u>	- Contact			Phone			
I hereby represent that all	the above in	formation is	true and un	- derstand that m	aking false sta	ements might be co	onsidered fraud. By p	roviding the abo	ove informa	tion, 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 at 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	MARITZA TORRES	Date	11/09/2017
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