MoneyWorks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809
woney works >	Sales Rep: Patrick

DBA Name		Tooling Unlimit	ed	Le	egal Name	Tooling Unli	mited	
Type of Business Ejection Molds			тТ		58-2063604		Corp	
Full Business Addre	SS	436 Cougar Lan	e					<u> </u>
Full Billing Address								
Phone at Location		(706) 276-2900		Best Phone			Fax	(706) 276-3602
Business Email		toolingunl@elli	jay.com		Website	_		
Years In Business		42	Average Ti	cket		Gross Annua	l Sales 1	84,000.00
Do you currently h	ave cash a	advance?	Yes	With who? _			Balan	ce
Current Credit Card	d Processo	or			_ Averag	e Processing Vo	lume	
Last Month Vol.		#of Ti	ckets		2nd Month Vol		#of Tid	ckets
3rd Month Vol.		#of Ti	ckets		4th Month Vol		#of Tid	ckets
Owner #1 Name	Ed Cylke			Title –				
Date of Birth	07/14/193			SSN -	363-38-3	1650		
Full Home Address		ar Lane; Ellijay, GA						
Home Phone	(706) 276	5-2900 Cell	Phone	(404) 386-9	143 Email	toolin	gunl@ellijay.co	om
Own/Rent	\$ <u>0 Own</u>	Yea	ars There 48	<u> </u>	rivers Lience #	007792741	State	GA
Owner #2 Name				Title -	-			
Date of Birth				SSN -				
Full Home Address								
Home Phone		Cell	Phone		Email			
Own/Rent	\$	Yea	ars There	D	rivers Lience #		State	
Business Home Bas	ed?	No Locatio	n: Lease/Owr	owned	Lease Te	erm	Monthl	y Rent
Landlord / Mortgage	e Co				Con	tact		
Contact Phone	_		Ce	·II		Ema	il	
Bank Name/Branch	Regions	5	Contact			Phone	(706) 276	-0100
Trade Reference#1	_		 Contact			 Phone		
Trade Reference#2	-		— Contact	-		 Phone		
Trade Reference#3			 Contact			Phone		
I hereby represent that all	the above in	formation is true and	understand that n	naking false sta	tements might be co	onsidered fraud. By p	roviding the abo	ve information, 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	Ed Cylke	Date	02/21/2018
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