MoneyWorks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Julian
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DDA Nama		Voull Never Cuess			Legal Name Y.N.G. LLC Youll Never Gu			Cuocc		
			Youll Never Guess		Legal Name					
Type of Business		3d Printing			_Tax ID		26-3487808			LLC
Full Business Addre	SS	1840 N 700	JVV							
Full Billing Address		(555) 555	1010			(555)	\		(0.55)	
Phone at Location		(555) 555-1212			Best Phone (555)			Fax	(866)	859-0593
Business Email		yngwebsales@gmail.com			Website		yngllc.com			
Years In Business		2012	Average	Ticket			Gross Annual	Sales	1,750,000	0.00
Do you currently ha	ave cash a	advance?	Yes	With wh	o? <u>EYS &</u>	CFG		Bala	nce <u>1100</u>	0.00
Current Credit Card Processor Average Processing Volume										
Last Month Vol.		#	of Tickets		2nd	Month Vol.		#of 7	ickets	
3rd Month Vol.		#	of Tickets _		4th	Month Vol.		#of 7	ickets	
Owner #1 Name	Ronald Ka	asparian			Title	Owner				
Date of Birth	07241985	-			SSN	312-08-48	96			
Full Home Address	1700w W	ood RD								
Home Phone	(555) 555	5-1212	Cell Phone	(555) 5	55-1212	Email	yngwe	bsales@gm	ail.com	
Own/Rent	\$ 0 Own	1	- Years There	1	Drivers	 Lience #1	200107878	State	Indiar	na
Owner #2 Name					Title					
Date of Birth				<u></u>	SSN					
Full Home Address										
Home Phone			Cell Phone			Email				
Own/Rent	\$		Years There		Drivers	Lience #		State		
Business Home Bas	ed?	No Lo	cation: Lease/O	wn <u>Lea</u>	sed	_Lease Terr	m <u>3</u> years	Mont	hly Rent	1,000.00
Landlord / Mortgage	e Co. <u>N</u>	oreen			_	Conta	act	Noreen		
Contact Phone	<u>(5</u>	555) 555-12	12	Cell	(555) 5	555-1212	Email	no	reen1957	@hotmail.com
Bank Name/Branch			Conta	ct			Phone			
Trade Reference#1			 Conta	ct			— Phone			
Trade Reference#2			 Conta	ct			— Phone			
Trade Reference#3			Conta	ct			— Phone			
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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 relating to any of you, to Money Works Direct and to each of the Recipients, on its own behalf.

Signature#1	Printed Name	Ronald Kasparian	Date	12/13/2017