MoneyWorks >>	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: John

DBA Name	MultiServices			Legal Name				MultiServices				
Type of Business		Finance			T	Tax ID		260133079				Sole Prop
Full Business Addre	SS	503 Lyon	s Ave									
Full Billing Address												
Phone at Location		(973) 926-1869			Best Phone (908)			340-91	57	Fax	(973)	926-2859
Business Email		wabimah@yahoo.com			Website							
Years In Business		1		Average Tid	cket _			Gross A	Annual S	ales	105,000.0	00
Do you currently ha	ave cash	advance?		No '	With who?					Bala	nce	
Current Credit Card	l Process	or				_	Average	Processi	ng Volur	me		
Last Month Vol.			#of Ticke	ets		2nd	Month Vol.			#of T	ickets	
3rd Month Vol.			#of Ticke	ets		4th I	Month Vol.			#of ٦	ickets	
Owner #1 Name	Winfrod	\himah			Title	^	Owner					
Date of Birth	12-07-19	Winfred Abimah			SSN 155-90-996			68				
Full Home Address		man Ave, #	2 Nowark I	NI 07114	-	V						
Home Phone	(908) 340	-	Cell Ph		(908) 340-	9157	Email		wahimal	n@yahoo.	-om	
Own/Rent	\$ 0 Owr		— Years				_	1046787	7207592		NJ	
· · · · · · · · · · · · · · · · · · ·	¥ <u>* * * * * * * * * * * * * * * * * * *</u>		-			2	<u></u>				<u>,</u>	
Owner #2 Name					Title	e						
Date of Birth					- SSN	١						
Full Home Address					=							
Home Phone			Cell Ph	one			Email					
Own/Rent	\$		Years	There	[Drivers	Lience #			_State		
Business Home Bas	ed?	No	Location:	Lease/Own	Leased	d	Lease Tern	n		Mont	hly Rent	300.00
Landlord / Mortgage	 e Co.						- Conta	ıct				
Contact Phone	_			Ce	II				Email			
Bank Name/Branch	Wells F	argo		Contact				Ph	one			
Trade Reference#1				Contact				— Ph	one –			
Trade Reference#2				Contact	-			— Ph	one –			
Trade Reference#3				Contact				_	one –			
I hereby represent that all	he above in	nformation is	true and und	erstand that m	naking false st	atement	s might he cons	sidered fra	ud. By prov	viding the a	oove 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 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	Winfred Abimah	Date	02/15/2017
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