MoneyWorks Direct ADMINISTRATIVE FORM PLEASE FAX TO: 1.646.4	17.5809
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DBA Name	GREY ELEPHANT			Legal Name		Grey Ele	Grey Elephant		
Type of Business		Retail			_Tax ID	4730169	46	Sole Prop	
Full Business Addre	SS	404 main st	Ames IA 500	10				_	
Full Billing Address								_	
Phone at Location		(515) 291-	8272		Best Phone (515) 291-8272	Fax		
Business Email		greyelepha	ntames@gm	ail.com	Website				
Years In Business		2.5	Averag	ge Ticket		Gross Anr	nual Sales <u>3</u>	8,160.00	
Do you currently ha	ave cash	advance?	No	With who	?		Balan	ce	
Current Credit Card	l Process	or			Aver	age Processing	Volume		
Last Month Vol.		#0	of Tickets		2nd Month V	/ol.	#of Ti	ckets	
3rd Month Vol.		#0	of Tickets		4th Month V	ol	#of Ti	ckets	
Owner #1 Name	Tara Hat	field		Т	itle Owne	r			
Date of Birth	0902197					8-3964			
Full Home Address	110 Math								
Home Phone	(515) 29		Cell Phone	(515) 29	1-8272 Email	gr	eyelephantames@	Dgmail.com	
Own/Rent	\$ 0 Owi	n	Years There	3 years	 Drivers Lience #		State	IA	
					_				
Owner #2 Name				Т	itle				
Date of Birth					SN				
Full Home Address									
Home Phone			Cell Phone		Email				
Own/Rent	\$		Years There		Drivers Lience #	·	State		
Business Home Bas	ed?	No Loc	cation: Lease,	/Own Leas	ed Lease	Term	Month	ly Rent	
Landlord / Mortgage	e Co. <u>A</u>	∆&H propertie	es		C	ontact	Dave Aust	in	
Contact Phone	<u>(</u>	515) 231-078	34	Cell	(515) 231-0784	<u>4</u> Eı	mail		
Bank Name/Branch	Greate	r Iowa credit	union Con	tact		Phone	e		
Trade Reference#1			Con	tact		Phone	e		
Trade Reference#2			Con	tact		Phone	 e		
Trade Reference#3			Con	tact		Phone			
I haraby raprocent that all	the chave is	oformation is torus		that making false	statements might be	considered fraud	Du providing the abo	nue 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	Tara Hatfield	Date	06/27/2017