	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Julian
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DBA Name		ROHR RACING, LLC		Legal Name		ROHR RACING, LLC		
Type of Business						47-5647137		LLC
Full Business Addre	SS	602 KILLKENNY	COURT MALTA,					
Full Billing Address			·					
Phone at Location		(207) 329-2857		Best Phone		Fax		
Business Email					Website			
Years In Business		13+	Average Tick	et		Gross Annua	l Sales 650,000.00	
Do you currently ha	ave cas	h advance?	No W	ith who? _			Balance	
Current Credit Card	l Proces	ssor			Average	Processing Vo	lume	
Last Month Vol.		#of T	ickets		2nd Month Vol.		#of Tickets	
3rd Month Vol.		#of T	ickets		4th Month Vol.		#of Tickets	
Owner #1 Name	HEIDI F	ROHR		Title	OWNER			
Date of Birth	082419			SSN	001-62-704	42		
Full Home Address	602 KII	LLKENNY COURT MAI	TA, NY 12020					
Home Phone	(207) 3	329-2857 Ce	II Phone		Email	heidir	ohrstable@yahoo.com	
Own/Rent	\$ <u>0 R</u>	ent Ye	ears There 5	D	rivers Lience # 26	55917924	State NY	
Owner #2 Name				Title				
Date of Birth				SSN				
Full Home Address								
Home Phone		Ce	II Phone		Email			
Own/Rent	\$	Y6	ears There	D	rivers Lience #		State	
Business Home Bas	ed?	No Locati	on: Lease/Own	Leased	Lease Tern	n <u>INDEFIN</u>	ITE Monthly Rent 0	.00
Landlord / Mortgage	e Co.	SARATOGA CASII	NO & HOTEL		Conta	ct	ED MATHEWS X5650	
Contact Phone		(518) 584-2110	Cell	_		Ema	il	
Bank Name/Branch	BANK	OF AMERICA	Contact	SARATO	GA SPRINGS	Phone	(518) 587-5461	
Trade Reference#1			 Contact			– Phone		
Trade Reference#2			— Contact			– Phone		
Trade Reference#3			 Contact			– Phone		

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 authorized in 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	HEIDI ROHR	Date	01/26/2017