

DBA Name	Kathleen A Long		Legal Name	A Stitch N' Time	
Type of Business	Awnings		Tax ID	202452250 Corp	
Full Business Address	15199 Dyers rd				
Full Billing Address					
Phone at Location	(703) 730-5335		Best Phone	(703) 730-5335	Fax (703) 730-5335
Business Email	asntime@comcast.net		Website	astitchntimeawnings.com	
Years In Business	27	Average Ticket		Gross Annual Sales	190,000.00
Do you currently have cash advance?	No	With who?			Balance
Current Credit Card Processor			Average Processing Volume		
Last Month Vol.		#of Tickets		2nd Month Vol.	
3rd Month Vol.		#of Tickets		4th Month Vol.	

Owner #1 Name	Kathleen		Title	Owner		
Date of Birth	05041955		SSN	226-92-0138		
Full Home Address	15199 Dyers rd					
Home Phone	(703) 730-5335	Cell Phone	(703) 730-5335	Email	jearthwindfire@cox.com	
Own/Rent	\$ 0 Own	Years There	27	Drivers Lience #	A61300762	State VA
Owner #2 Name			Title			
Date of Birth			SSN			
Full Home Address						
Home Phone		Cell Phone		Email		
Own/Rent	\$	Years There		Drivers Lience #		State

Business Home Based?	<u>Yes</u>	Location:	<u>Lease/Own</u>	<u>Owned</u>	Lease Term	<u>                </u>	Monthly Rent	<u>                </u>
Landlord / Mortgage Co.	<u>Ocwen</u>				Contact	<u>                                    </u>		
Contact Phone	<u>                        </u>	Cell	<u>                        </u>		Email	<u>                                    </u>		

Bank Name/Branch	Suntrust	Contact	Phone	(800) 786-8778
Trade Reference#1	Foam to size	Contact	Phone	(180) 054-8550
Trade Reference#2	Trivanage	Contact	Phone	(336) 586-1222
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 authorization will be deemed as acceptable for release of credit information. I/we authorize Money Works Direct, Inc. to receive pertinent 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 above listed business and business owner/officer (individually and collectively, "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 transaction, including without limitation the application therefor (collectively, "Transaction") 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	Kathleen Long	Date	11/06/2017
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