

DBA Name		NEW LIF	E COMPUTE	ERS, LLC	Le	gal Name	NEW LIFE CO	MPUTERS, LLC	
Type of Business		COMPUTER IT/REPAIR			Tax ID8		82-1923647		Corp
Full Business Addre	ess	720 S CO	LORADO B	OULEVARD					
Full Billing Address									
Phone at Location	Phone at Location (720) 386-4100				В	est Phone (720) 386-4100	Fax	
Business Email	NewLifeComputers@Pr			@Programm	ogrammer.net Websit		www.NewLifeComputers.us		
Years In Business		14	A	verage Tick	et		Gross Annual	Sales <u>1,900,00</u>	00.00
Do you currently h	ave cash	advance?	N	lo Wi	th who? _			Balance	
Current Credit Card Processor Average Processing Volume									
Last Month Vol.			#of Ticket	s		2nd Month Vol.		#of Tickets	
3rd Month Vol.			#of Ticket	s		4th Month Vol.		#of Tickets	
Owner #1 Name	RICHARD	FARRAR			Title	OWNER/PI	RINCIPLE		
Date of Birth	04/22/19	57			SSN	562-82-23	323		
Full Home Address	4198 Osc	eola Street	, Denver CO	80212					
Home Phone	(720) 386	5-4100	Cell Pho	ne (970) 239-43	300 Email	NewLit	feComputers@Progra	mmer.net
Own/Rent	\$ <u>0 Owr</u>	1	Years T	here 14	Dr	ivers Lience # N	3250803	State CA	
Owner #2 Name					Title				
Date of Birth Full Home Address					SSN				
Home Phone			Cell Pho	ne		Email			
Own/Rent	\$		— Years T	_	Dr	ivers Lience #		State	
			-			_			
Business Home Bas	sed?	No	Location: L	ease/Own	Leased	Lease Teri	m	Monthly Rent	<u> </u>
Landlord / Mortgag	e Co. <u>A</u>	ssociated	Property S	ervices, Inc		Conta	act	Commercial Unit-	Manager (Any)
Contact Phone	<u>(</u>	719) 888-	5211	Cell			Email		_
Bank Name/Branch	Wells F	argo Bank	(Contact	Associa	te-Elizabeth	Phone	(800) 919-5266	
Trade Reference#1	1 Express Computers, Inc			Contact	Donald Robinson, Jr		Phone	(800) 608-4922	
Trade Reference#2	COMPUTERS DIMENSION Con			Contact	SALES- Mandy M.		Phone	(720) 307-3443	
T	NOTAD								
Trade Reference#3	-Hawaii	Y 4 ROTAF	\1	Contact	SALES N	MANAGER	Phone —	(747) 477-8522	

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	RICHARD FARRAR	Date	06/27/2017