

DBA Name	VICTOR R TALLUTO, CPA, PA		Legal Name	VICTOR R TALLUTO, CPA, PA	
Type of Business	CPA FIRM - ACCOUNTING & TAXES		Tax ID	52-2207944	Corp
Full Business Address	7 SHIPPING PLACE, BALTIMORE MD 21222				
Full Billing Address					
Phone at Location	(410) 282-8000	Best Phone	(410) 282-8000	Fax	(410) 282-8002
Business Email	AXLSDADDY@VERIZON.NET		Website	VRTCPA.COM	
Years In Business	28	Average Ticket		Gross Annual Sales	200,000.00
Do you currently have cash advance?	Yes	With who?	SWIFT/ 2 OTHERS		Balance 15600/12400
Current Credit Card Processor			Average Processing Volume		
Last Month Vol.		#of Tickets		2nd Month Vol.	
3rd Month Vol.		#of Tickets		4th Month Vol.	

<b>Owner #1 Name</b>	VICTOR R TALLUTO		Title	PRESIDENT	
Date of Birth	08 /09/1952		SSN	217-60-0799	
Full Home Address	5009 HILLTOP ACRES ROAD				
Home Phone	(410) 282-8000	Cell Phone		Email	AXLSDADDY@VERIZON.NET
Own/Rent	\$ 0 Own	Years There	32	Drivers Lience #	T-430-847-744-623 State MD
<b>Owner #2 Name</b>			Title		
Date of Birth			SSN		
Full Home Address					
Home Phone		Cell Phone		Email	
Own/Rent	\$	Years There		Drivers Lience #	State

Business Home Based?	No	Location: Lease/Own	Leased	Lease Term	MONTH TO MONTH	Monthly Rent	1,636.00
Landlord / Mortgage Co.	7 SHIPPING PLACE LLC			Contact	GREG CARSON		
Contact Phone	(443) 604-5126	Cell	(443) 604-5126	Email	GTC216@HOTMAIL.COM		

Bank Name/Branch	M & T BANK / DUNDALK, MDC	Contact	CHARLES	Phone	(410) 244-4000
Trade Reference#1	STAPLES	Contact		Phone	(800) 767-1291
Trade Reference#2	QUILL CORP	Contact		Phone	(800) 789-1331
Trade Reference#3	ALLSTATE INSURANCE	Contact	RICK ANDERSON	Phone	(410) 284-7770

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	VICTOR R TALLUTO	Date	01/29/2017
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