DBA Name		LAM Services LLC			Legal Name		LAM Services	LLC	
Type of Business		Construction			Tax ID		571130038		LLC
Full Business Address 760 Travelers Blvd. Ste. B Summerville, Sc 29485									
Full Billing Address									
Phone at Location		(843) 4	60-5473		В	est Phone (843) 460-5473	Fax	
Business Email		ajohnso	on@lamserv	icesllc.com	<u> </u>	Website	www.LAMSer	vicesllc.com	
Years In Business		15		verage Tic	ket		Gross Annual	Sales <u>1,500,000.0</u>	00
Do you currently ha	ave cash	advance?	? !	lo V	Vith who?			Balance	
Current Credit Card Processor Average Processing Volume								ume	
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	Andra Joh	nnson			Title	Owner			
Date of Birth	06/03/19				SSN	5900-5-9	96		
Full Home Address	112 Shad	112 Shadybrook Drive Summerville, SC 29483							
Home Phone	(843) 460)-5473	Cell Pho	ne	(843) 460-54	73 Email	andrajo	ohnson1@gmail.com	
Own/Rent	\$ 0 Ren	t	Years T	here 8	Dri	vers Lience # 1	00189875	State SC	
Owner #2 Name					Title				
Date of Birth					SSN				
Full Home Address									
Home Phone			Cell Pho	-		Email			
Own/Rent	\$		Years T	here	Dri	vers Lience #		State	
Business Home Bas	ed?	No	Location: L	ease/Own	Leased	Lease Terr	m	Monthly Rent	
Landlord / Mortgage	e Co. <u>C</u>	akbrook	Business Pa	ark		Conta	act	Patrick	
Contact Phone	(8	843) 871	-9110	Cell	<u>(84</u>	3) 871-9110	Email		
Bank Name/Branch Bank Of America			Contact	Manage	r	Phone	(843) 851-4080		
Trade Reference#1	erence#1 American Express			Contact	Manage	r	— Phone	(800) 528-4800	
Trade Reference#2	2 Sherwin Williams			Contact	Manage	r	Phone	(843) 851-8631	
Trade Reference#3	L-3 Mar L	nagemen	t Services	Contact	LaShand	da	Phone	(843) 819-5307	

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	Andra Johnson	Date	10/30/2017