

DBA Name		USMC Veteran Painting & Contracting				Legal Name		USMC Veteran Painting & Contracting				
Type of Business		Construction				_Tax ID		46-3878877			LLC	
Full Business Addre	:SS	2121 ei	senhower	ave								
Full Billing Address												
Phone at Location		(703) 519-6804				Best Phone (757)		404-0244	Fax	(703)	684-3620	
Business Email	sonny@usmcvpainters.com			Webs		lebsite	www.usmcvpa	ainters.con	า			
Years In Business		3.5 Av			age Ticket			Gross Annual Sales 900		00,000.0	0,000.00	
Do you currently ha	ave cash	advance ²	?	Yes	With who?		sion Capital, vay Capital	Kabbage,	Balar	nce 44K,	38K, and 18K,	
Current Credit Card	d Process	or				_	Average	Processing Volu	ime			
Last Month Vol.			#of Tick	cets		2nd	Month Vol.		#of Ti	ckets		
3rd Month Vol.			#of Tick	cets		4th	Month Vol.		#of Ti	ckets		
Owner #1 Name	Carroll Fr	reeman			Tit	le	Owner					
Date of Birth	06/21/19	63			– SS	N	223-80-864	46				
Full Home Address	13634 ki	ngsman ro	ad		_							
Home Phone	(757) 40	4-0244	Cell F	Phone	(757) 404	-0244	Email	sonny@	usmcvpaint	ers.com		
Own/Rent	\$ 0 Own	า	Year	s There <u>7</u>	574040244	Drivers	 Lience #a6	51732469	State	Virgin	ia	
Owner #2 Name					_ Tit	le						
Date of Birth					_ SS	N	-					
Full Home Address												
Home Phone			Cell F	Phone			Email —					
Own/Rent	\$		Year	s There _		Drivers	Lience #		State			
Business Home Bas	sed?	No	Location	: Lease/Ow	n <u>Lease</u>	d	_Lease Tern	n 24 month	Month	ly Rent	1,500	
Landlord / Mortgage	e Co. <u>L</u>	.RB Busin	ess Assoc	caites			Conta	ct	Lorraine B	arnes		
Contact Phone	<u>(</u>	703) 519	-1519	_ Ce	ell -			_ Email	lbaı	nes@lrb	bc.com	
Bank Name/Branch				Contact	-			Phone				
Trade Reference#1				– Contact				Phone			· · · · · · · · · · · · · · · · · · ·	
Trade Reference#2				_ Contact				 Phone				
Trade Reference#3				– Contact –				Phone				
I hereby represent that all authorize you to whom thi will provide financial state authorize Money Works Di	s application ements, tax	n is made o returns, etc	r your agent as you dee	s to investigate em necessary.	e my/our finan A photocopy o	cial resp of this au	onsibility and cr thorization will	edit worthiness, spe be deemed as acce	ecifically prince ptable for rele	ipal and co ease of cre	rporate entities, and dit information. I/We	

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	Carroll Freeman	Date	05/03/2017