## MERCHANT PROCESSING AGREEMENT

## **Merchant Application and Fee Schedule**

8500 Governors Hill Drive Symmes Twp, OH 45249-1384 Phone: 888-208-7231 Fax: 877-822-1248 Please carefully complete the Application and read the Terms and Conditions and other additional forms, as applicable to you, which together make up the Merchant Processing Agreement. The Terms and Conditions can be viewed at http://info.vantiv.com/NPCCMA. Please retain the website to review the Terms and Conditions as well a copy of the Merchant Application for your records. Worldpay ISO, Inc. ("NPC") and Member Bank's acceptance of this Application will be made in a manner authorized in the Agreements and/or Terms and Conditions.

## Sales Representative ID Number (9 digit or 16 digit code) T 1 1 3 7 R 0 1 8

Bank # or Merchant Association #:

Home Address:       City, State, ZIP: Bloomfield, MO 63825       Phone #: (573) 568-4603         Beneficial Owner/Officer/Principal Name:       Title: Owner       DOB: 10/28/1954       SSN #: 490-64-2326       Ownership Percentage 1         Home Address:       City, State, ZIP: Bloomfield, MO 63825       DOB: (573) 568-4603       Phone #: (573) 568-4603         Beneficial Owner/Officer/Principal Name:       Title:       DOB: Bloomfield, MO 63825       SSN #: (573) 568-4603         Beneficial Owner/Officer/Principal Name:       Title:       DOB: Bloomfield, MO 63825       SSN #: (573) 568-4603         Beneficial Owner/Officer/Principal Name:       Title:       DOB: City, State, ZIP:       SSN #: Percentage         Home Address:       City, State, ZIP:       Phone #:         Beneficial Owner/Officer/Principal Name:       Title:       DOB: City, State, ZIP:       SSN #: Percentage         Home Address:       City, State, ZIP:       Phone #:       Ownership Percentage         Home Address:       City, State, ZIP:       Phone #:         Beneficial Owner/Officer/Principal Name:       Title:       DOB: -       SSN #: -       Ownership Percentage         Home Address:       City, State, ZIP:       Phone #:       Phone #:       SECTION 3' IMPORTANT DISCLOSURES       Ownership Percentage         Merchant acknowledges receipt of NPC's documentation, which inc	SECTION 1 MERCHANT BUSINES	S INFORMATION				•••		
LIBERTY ARMS       COLT_AR15MODE14@YAH:OO.COM         Business Location Address:       Business Bulling Address: (f) different from location address)         20170 CO RD 625       City, State. Zip:         City, State. Zip:       City, State. Zip:         BLOOMFIELD, MO, 63825       Fax #:         Phone #:       (513) 568-4603         Federal Tax ID #: 26-2177068       Fax #:         SECTION 2. BENEFICIAL/CONTROL OWNERSHIP INFORMATION       Fax #:         To help the government fight financial crime. Federal regulation requires certain financial institutions to obtain, verify, and record information about the bein owners of cartain logal entity customers. Lagal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corrupt fraud, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforce investigate and prosecute these crimes.         Type of Legal Entity:       Association/Estate/Trust       Financial Institution       Partnership       ISEC Registered Entity         John Binghem       Individual/Sole Proprietor       Non-Profit/Tax-Exempt (SOL)       Publicly-Traded Corporation         Control Cwner/Officer/Principal Name:       Title:       IOOB:       SSN #:       Ownership         John Binghem       Owner       IO/28/1954       490-64-2326       Percentage 1         John Singham       Owner <td>JWB MACHINE LLC</td> <td>ch Business Tax Return Name)</td> <td>)</td> <td></td> <td></td> <td></td> <td></td> <td></td>	JWB MACHINE LLC	ch Business Tax Return Name)	)					
20170 CO RD 525       20170 CO RD 525         BLOOMFIELD, MO, 63825       Clty, State, Zp;         BLOOMFIELD, MO, 63825       Phone #:         Phone #:       Fax #:         Clty, State, Zp;       BLOOMFIELD, MO, 63825         Phone #:       Phone #:         Clty, State, Zp;       Phone #:         Clty, State, Zp;       Phone #:         Federal Tax ID #: 26-2177068       Fax #:         SECTION 2 BENEFICAL/CONTROL OWNERSHIP INFORMATION       Sectore #:         To heip the government fight financial crime, Federal regulation requires certain financial institutions to obtain, werify, and record information about the bein owners of cartain legal entity customers. Legal entities can be abused to disguise involvement in terrorist financial, money laundering, tax evasion, corrupt fraud, and other financial crimes. Requiring the disolosure of key individuals who own or control a kegal entity (Le, the beneficial owners) helps law enforce         Type of Legal Entity:       Association/Estate/Trust       Financial Institution       Private Corporation         Government (Finder/Principal Name:       Title:       DOWner       10/28/1954       490-64-2326         Owners/Difficer/Principal Name:       Owner       10/28/1954       490-64-2326       Percentage 1         John Bingham       Owner       10/28/1954       490-64-2326       Percentage 1         20170 Co Rd 525       Eltow	Business Name (DBA): LIBERTY ARMS	Check here if Corpora	te Headquarte	COLT_AR	15MOD614@YAH	OO.COM		
BLOOMFIELD, MO, 63825       BLOOMFIELD, MO, 63825         Phone #:       Phone #:         (513) 588-4603       Fax #:         Phone #:       (513) 588-4603         Federal Tax ID #: 26-2177068       SECTION 2. BENEFICIAL/CONTROL OWNERSHIP INFORMATION         To help the government fight financial crime, Federal regulation requires certain financial institutions to obtain, verify, and record information about the ben owners of certain legal entity outsomers. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corrupt result, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforce investigate and prosecute these crimes.         Type of Legal Entity:       Association/Estate/Trust       Inancial Institution       Pertures Corporation         Government (Federal/Stel/Loce)!       ZLC       Private Corporation         Individual/Sole Proprietor       INon-Profit/Tax-Exempt (501C)       Publicly-Traded Corporation         Control Owner/Officer/Principal Name:       Owner       10/28/1954       490-64-2326       Percentage 1         John Bingham       Owner       Owner       10/28/1954       490-64-2326       Percentage 1         Home Address:       City, State, ZIP:       DOB:       SSN #:       Ownership         20170 Co Rd 525       Bloomfield, MO 63825       (573) 568-4803	20170 CO RD 525			Business E 20170 CC	Silling Address: (if d DRD 525	ifferent from locatio	m address)	)
(513) 568-4603       (513) 568-4603         Federal Tax ID #: 26-2177068       (513) 568-4603         SECTION 2 BENEFICIAL/CONTROL OWNERSHIP INFORMATION       To help the government fight financial crime, Federal regulation requires certain financial institutions to obtain, verify, and record information about the benowners of cartain legal entity customers. Legal entities can be abused to disguise involvement in terrorist financial, werefy, and record information about the benowners of cartain legal entity customers. Legal entities can be abused to disguise involvement in terrorist financial, werefy, and record information about the benowners of cartain legal entity customers. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforce investigate and prosecute these crimes.         Type of Legal Entity:       Association/Estate/Trust       Imancial institution       Partnership       Imancial corporation         Government (Federal/State/Cool) // LLC       Imancial institution       Partnership       Imancial Corporation         John Bingham       Owner       10/28/1954       490-64-2326       Percentage 1         Home Address:       City, State, ZIP:       DOB:       SSN #:       Ownership         20170 Co Rd 525       Bitomfield, MO 63825       (573) 568-4603       Ownership         Beneficial Owner/Officer/Principal Name:       Owner       Over 10/28/1954       490-64-2326       Percentage 1         John Bingham       Owner/Officer/Principal Name:	BLOOMFIELD, MO, 63825							
SECTION 2 BENEFICIAL/CONTROL OWNERSHIP INFORMATION         To help the government fight financial crime. Federal regulation requires certain financial institutions to obtain, verify, and record information about the ben owners of cortain legal entity customers. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corrupt read, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforce investigate and prosecute these crimes.         Type of Legal Entity.       Association/Estate/Local) z LLC       Parinership       ISEC Registered Entity.         Government (Federal/State/Local) z LLC       Parinership       ISEC Registered Entity.       SEC Registered Entity.         John Bingham       Government (Federal/State/Local) z LLC       DOB:       SSN #:       Ownership         John Bingham       Owner       10/28/1954       490-64-2326       Percentage 1         Porter State.       City, State, ZIP:       Phone #:       IOWereship         20170 Co Rd 525       City, State, ZIP:       Phone #:       IOWereship         Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership         John Bingham       Owner       IO/28/1954       490-64-2326       Percentage 1         Home Address:       City, State, ZIP:       Phone #:       Phone #:       SSN #:       Owner		Fax #:			3-4603		Fax #;	
To help the government fight financial crime, Federal regulation requires certain financial institutions to obtain, verify, and record information about the ben owners of certain legal entity customers. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corrupt investigate and prosecute these crimes.         Type of Legal Entity       Association/Estate/Trust       Financial Institution       Partnership       SEC Registered Entity         Government (Federal/State/Local) 2       LLC       Private Corporation         Government (Federal/State/Local) 2       LLC       Private Corporation         Government (Federal/State/Local) 2       LLC       Private Corporation         Control Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership         John Bingham       Owner       Biomfield, MO 63825       (573) 588-4603       Percentage 1         Your Co Rd 525       Biomfield, MO 63825       (573) 588-4803       Percentage 1         20170 Co Rd 525       City, State, ZIP:       Phone #:       Ownership         20170 Co Rd 525       City, State, ZIP:       Ownership       Percentage 1         20170 Co Rd 525       City, State, ZIP:       Phone #:       Ownership         20170 Co Rd 525       City, State, ZIP:       Phone #:       Percentage 1         Beneficial Owner/Officer/Principal Name:       Ti	Federal Tax ID #: 26-2177068							
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□ Government (Federal/State/Local) ☑ LLC       □ Private Corporation         □ Individual/Sole Proprietor       □ Non-Profit/Tax-Exempt (501C)       □ Publicly-Traded Corporation         Control Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership         John Bingham       Owner       Di/28/1954       490-64-2326       Percentage 1         Home Address:       City, State, ZIP:       Phone #:       Ownership         John Bingham       Owner       DOB:       SSN #:       Ownership         John Bingham       Ownership       Eschowner/Officer/Principal Name:	owners of certain legal antity custo fraud, and other financial crimes. I investigate and prosecute these c	omers. Legal entities can be al Requiring the disclosure of key rimes.	bused to disgu / individuals wh	ise involveme to own or con	ent in terrorist finan	cing, money launde	aring tax ev	vasion corruption
John Bingham       Owner       10/28/1954       490-64-2326       Percentage 10         Home Address:       City, State, ZIP:       Phone #:       (573) 568-4603         20170 Co Rd 525       Bloomfield, MO 63825       (573) 568-4603         John Bingham       Owner       DOB:       SSN #:       (573) 568-4603         Home Address:       City, State, ZIP:       Phone #:       (573) 568-4803         Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership         Home Address:       City, State, ZIP:       Phone #:       Ownership       -         Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership         Home Address:       City, State, ZIP:       Phone #:       Phone #:       Downership       -         Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership <td>⊐ Gov ⊐ Indiv</td> <td>vernment (Federal/State/Local) vidual/Sole Proprietor</td> <td>⊠ LLC ⊡ Non-Profit/</td> <td></td> <td>□ Private 0 501C) □ Publicly-</td> <td>Corporation</td> <td></td> <td>Registered Entity</td>	⊐ Gov ⊐ Indiv	vernment (Federal/State/Local) vidual/Sole Proprietor	⊠ LLC ⊡ Non-Profit/		□ Private 0 501C) □ Publicly-	Corporation		Registered Entity
Home Address:       City, State, ZIP: Bloomfield, MO 63825       Phone #: (573) 568-4603         Beneficial Owner/Officer/Principal Name:       Title: Owner       DOB: 10/28/1954       SSN #: 490-64-2326       Ownership Percentage 1         Home Address:       City, State, ZIP: Bloomfield, MO 63825       DOB: (573) 568-4603       Percentage 1         20170 Co Rd 525       Bioomfield, MO 63825       Phone #: (573) 568-4603       Ownership Percentage 1         20170 Co Rd 525       Bioomfield, MO 63825       (573) 568-4603         Beneficial Owner/Officer/Principal Name:       Title:       DOB: Vonership       Phone #: Percentage         Home Address:       City, State, ZIP:       Phone #: Phone #:       Ownership         Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #: Percentage       Ownership         Home Address:       City, State, ZIP:       Phone #:       Ownership         Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #: Percentage       Ownership         Home Address:       City, State, ZIP:       Phone #:       Phone #:       SECTION 3' IMPORTANT DISCLOSURES       Ownership         Merchant acknowledges receipt of NPC's documentation, which includes Merchant Processing Agreement, Ver.GEN       Phone #:       SECTION 3' IMPORTANT DISCLOSURES	John Bingham	ame:					,	Ownership Percentage 100
Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership         John Bingham       Owner       10/28/1954       490-64-2326       Percentage 10         Home Address:       City, State, ZIP:       Phone #:       [573) 568-4603         Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership         Home Address:       City, State, ZIP:       Phone #:       [573) 568-4603         Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership         Home Address:       City, State, ZIP:       Phone #:       Ownership       Percentage         Home Address:       City, State, ZIP:       Phone #:       Ownership         Home Address:       City, State, ZIP:       Phone #:       Ownership         Home Address:       City, State, ZIP:       Phone #:       Percentage         Home Address:       City, State, ZIP:       Phone #:       Percentage         Home Address:       City, State, ZIP:       Phone #:       Percentage         Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership         Home Address:       City, State, ZIP:       Phone #:       Percentage       Percentage								#:
John Bingham       Owner       10/28/1954       490-64-2326       Percentage 10         Home Address:       City, State, ZIP:       Phone #:       Phone #:       Phone #:       Phone #:         20170 Co Rd 525       Bloomfield, MO 63325       (573) 568-4603       Percentage       Phone #:         Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership         Home Address:       City, State, ZIP:       Phone #:       Ownership         Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership         Home Address:       City, State, ZIP:       Phone #:       Percentage         Home Address:       City, State, ZIP:       Phone #:       Ownership         Home Address:       City, State, ZIP:       Phone #:       Percentage         Home Address:       City, State, ZIP:       Phone #:       Percentage         Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership         Home Address:       City, State, ZIP:       Phone #:       Percentage       Percentage         Home Address:       City, State, ZIP:       Phone #:       Percentage       Percentage         Bectrion 3       IMPORTANT DISCLOSURES	Beneficial Owner/Officer/Principal	Name:				ISSN #'	1(0/0/0	
20170 Co Rd 525       Bloomfield, MO 63825       (573) 568-4603         Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership         Home Address:       City, State, ZIP:       Phone #:       Ownership         Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership         Home Address:       City, State, ZIP:       Phone #:       Ownership       Percentage         Home Address:       City, State, ZIP:       Phone #:       Ownership         Home Address:       City, State, ZIP:       Phone #:       Ownership         Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership         Home Address:       City, State, ZIP:       Phone #:       Phone #:       SSN #:       Ownership         Beneficial Owner/Officer/Principal Name:       Title:       DQB:       SSN #:       Ownership         Home Address:       City, State, ZIP:       Phone #:       Section 3' IMPORTANT DiscLOSURES       Phone #:         Bection 3' IMPORTANT DiscLOSURES       Merchant acknowledges receipt of NPC's documentation, which includes Merchant Processing Agreement Ver.GEN       Section 3' Important Comparison of the compariso	John Bingham							Percentage 100
Home Address:       City, State, ZIP:       Percentage         Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership         Home Address:       City, State, ZIP:       Phone #:       Percentage         Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership         Home Address:       City, State, ZIP:       Phone #:       Phone #:         Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership         Home Address:       City, State, ZIP:       Phone #:       Percentage         Home Address:       City, State, ZIP:       Phone #:         SECTION 3' IMPORTANT DISCLOSURES       Merchant acknowledges receipt of NPC's documentation, which includes Merchant Processing Agreement Ver.GEN	20170 Co Rd 525							
Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership         Home Address:       City, State, ZiP:       Phone #:         Beneficial Owner/Officer/Principal Name:       Title:       DOB:       SSN #:       Ownership         Home Address:       City, State, ZiP:       Phone #:       Ownership         Home Address:       City, State, ZiP:       Phone #:         SECTION 3' IMPORTANT DISCLOSURES       Merchant acknowledges receipt of NPC's documentation, which includes Merchant Processing Agreement, Ver, GEN		Name:	Title:		DOB:	SSN #: 		
Home Address:			Cit	ty, State, ZIP:			Phone	#:
Beneficial Owner/Officer/Principal Name:       Title:       DOB;       SSN #:       Ownership         Home Address:       City, State, ZIP:       Percentage         BECTION 3' IMPORTANT DISCLOSURES       Merchant acknowledges receipt of NPC's documentation, which includes Merchant Processing Agreement, Ver, GEN	-	Name:	Title:		DOB:	SSN #:		
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Home Address: City, State, ZIP: Phone #: SECTION 3 IMPORTANT DISCLOSURES Merchant acknowledges receipt of NPC's documentation, which includes Merchant Processing Agreement, Ver,GEN	Beneficial Owner/Officer/Principal	Nāme:	Title:		DQB;	SSN#:		
Merchant acknowledges receipt of NPC's documentation, which includes Merchant Processing Agreement Ver.GEN	Home Address:		Ċi	ly, State, ZIP:		<b>I</b>	Phone	
Agreement water of the a work in an addition and the addition of the addition	SECTION 3 IMPORTANT DISCLO		receipt of NPC	"s document:	ation which include	ee Marchant Groom	ring Agent	mont Vor GEN 1110
Member is responsible for and must provide settlement funds to the Merchant, (5) The Visa Member is responsible for all funds held in reserve that are derived from settlement. <b>IMPORTANT MERCHANT RESPONSIBILITIES:</b> (1) Ensure compliance with cardholder data security and storage requirements. (2) Maintain fraud and chargeback below thresholds. (3) Review and understand the terms of the Merchant Agreement. (4) Comply with 45249 (888) 208-723 authority should the Merchant have any problems. Signature (Signature may be evidenced by fagsimile)	products directly to a Merchant. (2 responsible for educating Merchan Member is responsible for and mu reserve that are derived from settle <b>IMPORTANT MERCHANT RESPON</b> Maintain fraud and chargeback be Operating Regulations. The respoi ensure the Merchant understands authority should the Merchant hav Signature (Signature may be evide	SPONSIBILITIES: (1) A Visa Me 2) A Visa Member must be a prints on pertinent Visa Operating ust provide settlement funds to lement. NSIBILITIES: (1) Ensure completow thresholds. (3) Review an- unsibilities listed above do not s some important obligations of e any problems.	ember is the on fincipal (signer) ; Regulations w the Merchant, iance with carc d understand t upersede the t	ly entity appr ) to the Merch with which Me (5) The Visa tholder data s he terms of the f terms of the f d that the Visa	oved to extend acc lant Agreement. (3 erchants must com Member is respons ecurity and storage Merchant Agreeme Merchant Agreeme a Member (Acquire	eptance of Visa i) The Visa Member oly. (4) The Visa sible for all funds he e requirements. (2) ment. (4) Comply w of and are provident	r is ald in Fiff 6500 Sym vith I to	MEMBER BANK: th Third Bank, N.A. 30 Worldpay LLC ) Governors Hill Drive nmes Township, OH 45249 (888) 208-7231
1× John Bingham Mar. 4,20	X John	- Berghan	registered ISO of		· · · · · · · · · · · · · · · · · · ·	Ho Bingham	- [m	

Merchant's Bu	siness	Name	(Legal):	JWB M	ACHIN	EUC	>										
SECTION 4 BU			ILE AND	ASSU	<b>IPTIO</b>	15											
□ Ownership o Change	r Legal	Entity	Clos	8 NPC I	Exiștin	g MiD	#.			Ch	ose D	ate Exis	sting MID:		Open Da	ite: 12/1/200	9
Annual Volume (Visa/MC/DS/AX);	\$16	,500.0		% Ca Prese		100	)	( q	% Card Swipe	95		(Manua	% Imprint By Keyed)	5	<u> </u>	% B2B	0
Average Ticket (Visa/MC/DS/AX);	\$3	00.00	%	Card N Prese		0		%	мото	0			% Internet	0	inter	% of national Cards	0
Highest Ticket (Visa/MC/DS/AX):	\$3,	000.00		Tot	el	100%	%										
🗅 Add'l. Locatio	n 1st L	ocatio	MID:						er Accept	ed Cards	0 Pi	ocesso	r Change - H	ow many proc	essiny state	ements are you	ı induding?
Type of Goods Service Sold:	'	Sport	ng Good	s Store:	5		REFUI (Chect	ND POLI k One):	ICY Ø R	o efund <sup>C</sup>	∃ Ref day	und in 3 's or les	No Mercha s exchan	ndise ge only <sup>(1)</sup> C	Other		
Seasonal Sales	: 🗆 Ye	38 ⊠	No Acti	ve Moni	hs: □	JAN	🗆 FE	B⊐M.	AR 🗆 A	PR 🗆 M	AY	⊐ JUN		UG 🗆 SE			DEC
SECTION 5 CO	MPLIA	NCE IN	FORMAT	ION	<i></i>	and a									1		
Do you (MERC)		have a	i 121 3rd p	arty sol	tware	applic	ation/g	jateway	or	Do you Electror				Paper - 11	YES 121	10	
Have you ever (	experie	nced a	in Accou	nt Data	Comp	romis	e? ⊑	YES (	ZNO	lf yes, ha	ve yo	u comp	leted remedi	ation? 🗅	res d n	10	
Third Party Sofi	ware/(	Satewa	y Vendo	r Name	and A	ddres	5:			Third Pa	rty So	iftware/	Gateway Ve	ndor Contac	t Informat	ion:	
Version #		Men	:hant dai	a to wh	ich thi:	s vend	lor has	access:					Does so	tware store	cardholde	ər informatio	n? CLYES
All merchants in comply with the successfully con (the "PCI Progra assessed in acc applicable fees rules ("PA DSS" SECTION 6 ME In accordance v MERCHANT with	requin mplete am") to cordand are set '). <b>RCHAI</b> /ith the	ements d a Sel assist ce with t forth i T BAN	of the F f Assess merchai the term n Section IK ACCO set out i	CI DSS ment Q nts in se s of the s of the s. All y UNT JNJ n the M	. Merc uestion curing PCI F gatewa	hant r nnaire card rogra ay or c ATION	nust va and so data a m. Info other va cessing	alidate it: can(s), i and comp mmation endor su y Agreen	s complia f applicat olying with on the P( opplied so nent, func	ince with t ble, and (t n PCI DSt CI Program ftware m ts will be	the F b) is c S. You m is s ust be transt	PCI DSS complian u are en et forth compli	and provide t with the PC rolled in the in Section 1 ant with the offrom the ac	NPC with e DSS. NPC PCI Program 5 of the Ter Payment Ap count as de	vidence to has created n and the ms and C plication I dineated.	hat Merchar ted the PCI applicable f onditions an Data Securit	it (a) has Program ees will be id the y Standard checked,
Service Provide	r with v	whom y	/ou have	contrac	:ted. *:	Subjec	ct to sp	eciat ap					.,	,	o ogoint oi		
Deposit Time F	ame:	ΩP	emium A	CH C	) Alte	mate	Fundin	ig*				Depo	sit Type: 🛛	Combined	Byl	Batch	
Any ACCOUNT account #1 will	NUME be use	BER ind d for S	dicated n	nust be	a valid	acco	unt nur	mber for	handling	ACH dep	osits	and with	hdrawals.	If more the	in one acc	count is indic	cated,
Routing #1:	0	8	1 5	1	7	9	o	7	DDA Accx	ount Type	. <b>3</b>	Checkir	ıg ⊡ Savin	gs			
Account #1:	3	1	1 0	2	1	4											
Routing #2:			•				•	DDA	Account	t <b>Type:</b> C	Che	ecking	Savings				
Account #2:								_1					C: Discour	it 🙄 Fees	C Cre	t is used for. dits ⊡ Ch	argebacks
NPC.CMA.111	9.MAG.	T1137		Worldpay	/ ISO, Ir	nc. ("Ni	PC ) is a	a registere	d ISO of F	ifth Third Ba	ank, N	A., 38 Fo	untain Square	Plaza, Cincinn	ati, OH 452	63 P	age 2 of 5

## Merchant's Business Name (Legal): JWB MACHINE LLC

SECTION 7 FEE SCHEDULE													
APPLICATION IZ Tiered	•		lat Rat	te*				D Daily	-		VICards E	Other	Carde
TYPE:  Interct			ash A				DISCOUNT:	7 Mont	CADE		Debit Card O		Cards
	⊠ Retail ⊐ Retail	C Rest	aurani		Mail/	Telep	ohone Order					<u> </u>	
VISA/MASTERCARD/DISC		Key Ente						OTO/CardS	Swipe" 🗆 La	arge Ticket			
Rate Catego		·/////////////////////////////////////	Dişç	ount F	Rate	Trar	saction Fee	AMERI	CAN EXPRE	SS Rate Category*	Discount	Rate	Fransaction Fee
Вазе				1.78	%	\$	0.10	Base			1.78	%	\$ 0.15
Mid-Qualified <sup>1</sup>			+	0.60	%	+ 5	0.00	Mld-Qualif	ied <sup>1</sup>		+ 0.60	%	+\$ 0.00
(Not Applicable for Rotal Key Enhand, MOTO, Int	emet. DialPay	Morchants)	┝										
Non-Qualified <sup>2</sup>			+	0.60	%	+\$	0.00	Non-Quali	fled <sup>2</sup>		+ 0.60	%	+\$ 0.00
	Regulated	l Only <sup>4</sup> 🗆	ł	1.48	%	+\$	0			Iscellaneous Pro	duct Fees		
Debit PiN-Based <sup>4</sup> M <sup>4</sup>	onthly Ho S	sting Fee	ŧ		%	\$		🗆 Wireless	Service <sup>3</sup>	1			
							Same as	Quantity	Setup Fee	Monthly Hosting Fee	Transactio	n Fee	
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Added to Base discount rate								Quantity	Setup Fee	Monthly Hosting	Transactio	n Eoo	
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NON PIN debit transactions fi	TOITTI OXOT	npt issue	ns will	fall ur	<b>ider</b> (	the B	lase V/MC/D	discount ra	te. If a rate is	s identified but the Re	oulated Only	v box is	not checked.
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FLAT RATE MERCHANTS O	NLY - CA	RD ORG/	NIZA	TION	FEES	i: Al	l fees are inc	luded in dis	count rate an	d transaction fee abov	ve except fe	es relat	ed to
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(NABU) - MasterCard <sup>2</sup>	40.00	/Gaus							Charged in t Months of	ger or rogramme	<del>èè</del> -	\$6.95	/month
Card Brand Usage Fee (NABU) - Visa <sup>2</sup>	\$0.06	/each		□Se	mi A	กกนอ	al Fee	\$0.00	March and	6 Monthly <sup>4</sup>			
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\*See Section 13 of the Terms and Conditions for additional information. NPC.CMA.1119.MAG.T1137 Worldpay ISO, Inc. (\*NPC\*) is a registered ISO of Fifth Third Bank, N.A., 38 Fountain Square Plaza, Cincinnati, OH 45263

Page 3 of 5

Merchant's Business N	iame (Legal): JWB MACHINE LLC			
SECTION 9 UNLIMITED	PERSONAL GUARANTY AND CREDIT	INFORMATION AUTHORIZATION		
PERSONAL GUARANTE paragraph (each such p Agreement. By signing i Terms and Conditions, a Guarantor individually a of him or her by utilizing	In exchange for NPC's and Membe erson, a "Guarantor") is signing this M below, each Guarantor (i) accepts and and (ii) acknowledges and confirms tha uthorizes NPC, Member Bank, and/or a third-party credit reporting agency a corporated herein by reference as if full	r Bank's acceptance of this Merc erchant Agreement as a Guaran agrees to be bound by the Conti at, prior to signing, he or she rece either of their representatives to nd/or to obtain a criminal backer	chant Agreement, each perso for of the Merchant identified nuing Unlimited Guaranty pro- sived and read those Continu, conduct an initial and ongoin ound check. Guarantor ackno	I on page 1 of the Merchant ovisions starting in Section 11 of the uing Guaranty provisions. Each g comprehensive credit investigation owtedges received the Merchant
Authorized Signature of	Guarantor: (Do Not Include Title)	Guarantor Name: John Bingham		Date of Signature:
Home Address V 20170 Co Rd 525			City, State, ZiP: Bioomfield,MO 63825	1
Date of Birth: 10/28/1954	Social Security Number: 490-64-2326	Phone #: (573) 568-4603		· · · · · · · · · · · · · · · · · · ·
SECTION 10 PATRIOT	ACT AND BACKGROUND AUTHORIZAT fight the funding of terrorism and mon	TION		and the second
agents to (i) investigate credit bureau and crimir signing below as an owr Bank whether or not a c NPC and/or Member Ba the terms of service of t	the identifying documents. The unders the information and references contain al background checks on the Merchar er or general partner of Merchant, or p onsumer report was requested. NPC a nk will give the individual the name an e Merchant Agreement. By providing t to obtain your consumer credit report.	ned herein, and to obtain addition thand its principals, including obt providing their Social Security N and/or Member Bank will tell suci d address of the agency that furr your SSN and signing this Apoli	al information about the Mero aining reports from consumer umber on the Application (if s in individual and, if NPC and/o uished it) and (ii) update such	chant and such individual(s) by pullin r reporting agencies on individuals such individual asks NPC or Member or Member Bank received a report, information periodically throughout
SECTION 11 MERCHAN	T ACKNOWLEDGEMENTS AND SIGNA	TURE		
(GEN.1119) as if fully se acknowledges that no h or electronically stored i reviewed all pages of tir information contained in way responsible or liable represents that it has ch promises, representation Merchant Agreement sh release of Merchant info American Express Prog	accepts the terms and conditions set f t forth herein (collectively, the "Mercha andwritten changes have been made to mage of the Merchant Agreement for a supplication, that all information provi- this Application, without further investi- e for the actions, inactions, performanc- osen for Itself any services, equipment ns, warranties, or covenants of the inde- all not be altered by any prior, contem- irmation in accordance with the provisi- ram, the applicable Opt Out Box has be the applicable opt Out Box has be	Int Agreement") and acknowledge o the printed text of the Merchan all legal purposes. Merchant repre- ided herein is intertuned: and ut igation, for all purposes. Merchan- e or lack of performance of any fit t or third party selected in connec- ependent sales representative. N poraneous or subsequent oral re- ons of Section 10 of the Terms a een marked.	es receipt of all parts of the M t Agreement and that the part sents, warrants and certifies mujiéte and ithai iNPC and M t acknowledges and agrees hird party provider or indepa- tion with the Merchant Agre PC or others. Merchant ack presentations made by any p and Conditions. If Merchant d	terchant Agreement. Merchant ties may produce and rely on a cop to NPC and Member Bank that it h fember Bank may rely on the that NPC and Member Bank are in endent sales representative. Mercha ement, and it has not relied on any nowledges and agrees that the arty. Merchant further authorizes the loes not want to participate in the
Terms and Conditions. T transaction. MERCHANT	F Merchant has caused this Agreemer The Agreement shall be binding upon	Merchant upon the earlier of Mer	orized representative effectiv chant's execution below or M	lerchant's first processed electronic
Signature (Signature ma	y be evidenced by facsimile)	Name (please print)	1 D. 1	Date

× Q.Q.	Brokan	-John Bingham		Jar. 4, 2020
NPC/CMA.1119.MAG.T1137	Werldpay ISO, Inc. ("NPC") is a regist	tered ISO of Fifth Third Bank, N.A., 38 Fountain Square Plaza, Ci	incionati, OH 45263	Page 4 of 5
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SECTION 43 OTTE INCORCINON IN								
	nation set fort	h in the applica	tion is true and accu	urate to the	best of my knowled	pe. In addition. I hereby	certify that (check	which applies
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