

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/NPCGMA>. Please retain the website to review the Terms and Conditions as well as 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)						Bank # or Merchant Association #:					
T 1 1 3 7 R 0 0 0											
SECTION 1: MERCHANT BUSINESS INFORMATION											
Business Legal Name: (Must Match Business Tax Return Name) AFFORDABLE URGENT CARE LLC						Contact Name: SUNITA PAREEK					
Business Name (DBA): AFFORDABLE URGENT CARE						E-mail address: SUNITA6258@YAHOO.COM			Website:		
Business Location Address: PO BOX 326						Business Billing Address: (if different from location address) PO BOX 326					
City, State, Zip: HERNANDO, MS, 38632						City, State, Zip: HERNANDO, MS, 38632					
Phone #: (662) 429-9111			Fax #: (662) 429-6111			Phone #: (662) 429-9111			Fax #: (662) 429-6111		
Federal Tax ID #: **-***** 26-250 2875											
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 beneficial owners of certain legal entity customers. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, 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 enforcement investigate and prosecute these crimes.											
Type of Legal Entity: Association/Estate/Trust: Financial Institution Partnership SEC Registered Entity Government (Federal/State/Local) / LLC Private Corporation Individual/Sole Proprietor Non-Profit/Tax-Exempt (501C) Publicly-Traded Corporation											
Control Owner/Officer/Principal Name: Sunita Pareek				Title: Owner		DOB: 1/20/1958		SSN #: 428-63-6268		Ownership Percentage: 100	
Home Address: 896 Parkway Drive				City, State, ZIP: Hernando, MS 38632		Neobit MS 38651		Phone #: (801) 212-4583			
Beneficial Owner/Officer/Principal Name: Sunita Pareek				Title: Owner		DOB: 1-21-68		SSN #: 428-63-6268		Ownership Percentage	
Home Address: 825 Parkway Rd				City, State, ZIP: Hernando, MS 38632		Neobit MS 38651		Phone #: (801) 212-4583			
Beneficial Owner/Officer/Principal Name:				Title:		DOB:		SSN #:		Ownership Percentage	
Home Address:				City, State, ZIP:		Phone #:					
Beneficial Owner/Officer/Principal Name:				Title:		DOB:		SSN #:		Ownership Percentage	
Home Address:				City, State, ZIP:		Phone #:					
Beneficial Owner/Officer/Principal Name:				Title:		DOB:		SSN #:		Ownership 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/0718											
<p>IMPORTANT MEMBER BANK RESPONSIBILITIES: (1) A Visa Member is the only entity approved to extend acceptance of Visa products directly to a Merchant. (2) A Visa Member must be a principal (signer) to the Merchant Agreement. (3) The Visa Member is responsible for educating Merchants on pertinent Visa Operating Regulations with which Merchants must comply. (4) The Visa 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.</p> <p>IMPORTANT MERCHANT RESPONSIBILITIES: (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 Operating Regulations. The responsibilities listed above do not supersede the terms of the Merchant Agreement and are provided to ensure the Merchant understands some important obligations of each party and that the Visa Member (Acquirer) is the ultimate authority should the Merchant have any problems.</p>										<p>MEMBER BANK: Fifth Third Bank c/o Worldpay LLC 8500 Governors Hill Drive Symmes Township, OH 45249 (888) 250-9784</p>	
Signature (Signature may be evidenced by facsimile) X Sunita Pareek						Name (please print): SUNITA PAREEK			Date: 12/12/18		

Merchant's Business Name (Legal): AFFORDABLE URGENT CARE LLC

SECTION 4 BUSINESS PROFILE AND ASSUMPTIONS														
Ownership or Legal Entity Change		Close NPC Existing MID#:			Close Date Existing MID:			Open Date: 11/1/2014						
Annual Volume (Visa/MC/DS/AX):	\$240,000.00	% Card Present	100	% Card Swipe	95	% Imprint (Manually Keyed)	5	% 62B	0					
Average Ticket (Visa/MC/DS/AX):	\$250.00	% Card Not Present	0	% MOTO	0	% Internet	0	% of International Cards	0					
Highest Ticket (Visa/MC/DS/AX):	\$2,000.00	Total	100%											
Add'l. Location 1st Location MID:		Never Accepted Cards			Processor Change - How many processing statements are you including?									
Type of Goods/Service Sold: Doctors and Physicians_Not Elsewhere Classified		REFUND POLICY (Check One):		No Refund	Refund in 30 days or less	Merchandise exchange only	Other							
Seasonal Sales:	Yes <input checked="" type="checkbox"/> No	Active Months:	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
SECTION 5 COMPLIANCE INFORMATION														
Do you (MERCHANT) have a 3rd party software application/gateway or POS Terminal										Are you compliant with the Payment Card Industry Data Security Standards?				
If yes, identify Security Assessor and certificate number										Last Certification Date:				
Have you been notified by Visa, MasterCard or Discover that you have been the victim of a compromise of cardholder data? YES <input checked="" type="checkbox"/> NO										If yes, have you completed remediation? YES <input type="checkbox"/> NO				
										Do you store cardholder data? Paper - YES <input checked="" type="checkbox"/> NO Electronic - YES <input type="checkbox"/> NO				
Third Party Software/Gateway Vendor Name and Address:										Third Party Software/ Gateway Vendor Contact Information:				
Version #										Merchant data to which this vendor has access:				
Does software store cardholder information? Yes <input type="checkbox"/> No										Is Third Party Software/Gateway PCI DSS and/ or PA DSS Compliant? Yes <input type="checkbox"/> No				
All merchants must comply with the Payment Card Industry Data Security Standard ("PCI DSS"). Merchant is required to maintain the security of card data and to comply with the requirements of the PCI DSS. Merchant must validate its compliance with the PCI DSS and provide NPC with evidence that Merchant (a) has successfully completed a Self Assessment Questionnaire and scan(s), if applicable, and (b) is compliant with the PCI DSS. NPC has created the PCI Program (the "PCI Program") to assist merchants in securing card data and complying with PCI DSS. You are enrolled in the PCI Program and the applicable fees will be assessed in accordance with the terms of the PCI Program. Information on the PCI Program is set forth in Section 15 of the Terms and Conditions and the applicable fees are set forth in Section 11. All gateway or other vendor supplied software must be compliant with the Payment Application Data Security Standard rules ("PA DSS").														
SECTION 6 MERCHANT BANK ACCOUNT INFORMATION														
In accordance with the terms set out in the Merchant Processing Agreement, funds will be transferred to/from the account as delineated. If nothing is checked, MERCHANT will receive Premium ACH. ACH can be performed by the following entities: Member Bank, NPC or any authorized agent of NPC or any Third Party Service Provider with whom you have contracted. *Subject to special approval														
Deposit Time Frame: <input checked="" type="checkbox"/> Premium ACH <input type="checkbox"/> Alternate Funding										Deposit Type: <input checked="" type="checkbox"/> Combined <input type="checkbox"/> By Batch				
Any ACCOUNT NUMBER indicated must be a valid account number for handling ACH deposits and withdrawals. If more than one account is indicated, account #1 will be used for Sales.														
Routing #1:	084205915				DDA Account Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings									
Account #1:	00240931													
Routing #2:					DDA Account Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings									
Account #2:							If a second account, this account is used for: Discount <input type="checkbox"/> Fees <input type="checkbox"/> Credits <input type="checkbox"/> Chargebacks <input type="checkbox"/>							
SECTION 7 CHECK/ACH SERVICES														
If Check Services are selected and by signing Merchant Processing Agreement, Merchant agrees to accept Check Services pursuant to, and to be bound by, the terms and conditions for Check products acceptance as stated in the Merchant Processing Agreement or as provided by Check services provider, SPS-EFT, or other service provider. Member Bank is not providing the Check/ACH Services. Merchant must be approved by NPC and its service provider, SPS-EFT, or by other service provider.														
** For Non-Guarantee checks \$10,000 and greater: A premium of 0.10% (ten basis points) will be charged in addition to the discount rate.														
***These fees apply per account														
Check Service	Discount Rate	Transaction Fee	Check Service	Discount Rate	Transaction Fee	Other Check21 Fees								
Check Conversion w/ Guarantee			Check21 POS - Guarantee			Check21 Return Fee**: \$ 5.00								
Check Conversion w/o Guarantee			Check21 POS - Non-Guarantee**	0.00	0.00	Monthly Check21 Access Fee**: \$ 5.00								
Paper Check w/ Guarantee			Check21 Remote - Guarantee	0.00	0.00	Check21 POS Payroll option - Guarantee: Discount Rate + 3% premium								
			Check21 Remote - Non-Guarantee**			Check21 POS Payroll option - Non-Guarantee: Discount Rate + 1% premium								
# of Checks	Average Amount:	Largest Check	Monthly Service	Batch Fee:	Monthly Minimum**	Annual Fee**	Monthly Billing Termination Fee**							

Monthly:	Amount:	Fees:	\$25.00	\$59.95	\$125.00
NPC CMA 0718 MAG 71137	Wordpay (SO, Inc. (NPC) is a registered ISO of Fifth Third Bank, 36 Fountain Square Plaza, Cincinnati, OH 45263				Page 2 of 5

Merchant's Business Name (Legal): AFFORDABLE URGENT CARE LLC

APPLICATION TYPE		Tiered ¹ Interchange ²	Flat Rate ³ Cash Advance	DISCOUNT:	Daily Monthly	CARD OPTIONS:	All Cards Debit Card Only	Other Cards
BUSINESS TYPE		Retail	Restaurant	Mail/Telephone Order	Internet ⁴	MOTO/CardSwipe	Large Ticket	
SUB BUSINESS TYPE		Retail Key Entered	DialPay Captures	MOTO	CardSwipe			
VISA/MASTERCARD/DISCOVER (V/MC/D) Rate Category		Discount Rate	Transaction Fee	AMERICAN EXPRESS Rate Category ⁵		Discount Rate	Transaction Fee	
Base		0.35 %	\$ 0.10	Base		0.40 %	\$ 0.20	
Mid-Qualified ¹ <small>(Not Applicable for Retail Key Entered, MOTO, Internet, DialPay Merchants)</small>		+ 0.00 %	+ \$ 0.00	Mid-Qualified ¹		+ 0.00 %	+ \$ 0.00	
Non-Qualified ²		+ 0.00 %	+ \$ 0.00	Non-Qualified ²		+ 0.00 %	+ \$ 0.00	
Base Debit NON PIN-Based ³ <small>(Same as V/MC/D Discount Rate if not blank)</small>		0.00 %	+ \$ 0	Miscellaneous Product Fees				
Debit PIN-Based ⁴								
Regulated Only ⁶				Wireless Service ⁷				
Monthly Hosting Fee \$		%	\$	Quantity	Setup Fee \$	Monthly Hosting Fee \$	Transaction Fee \$	
Qualified Rewards ⁵		%	Same as Vise/MC/Discover Transaction Fee					
Transaction fees are charged for all transaction authorization attempts.								
Added to Base discount rate and transaction fee.								
Added to applicable Mid-Qualified discount rate and transaction fee.								
Transaction fee is in addition to the applicable Base, Mid-Qualified, or Non-Qualified transaction fee, regardless of transaction qualification.								
Debit Network Interchange, sponsorship, switch and gateway fees, and any miscellaneous fees will be assessed or allocated to Merchant at the then current rate determined in accordance with NPC's standard operating procedures.								
Same as Mid-Qualified discount rate if left blank for the applicable Reward categories collected by NPC (Not Applicable for Retail Key Entered, MOTO, Internet, DialPay Merchants).								
<p>TIERED MERCHANTS ONLY - Commercial Card transactions that do not meet the requirements to qualify for preferred rates will be assessed an additional fee of 0.50% (0.005) on such sales volume. Regulated applies to all Base NON PIN debit transactions from issuers that are not exempt pursuant to 12 CFR Part 235. NON PIN debit transactions from exempt issuers will fall under the Base V/MC/D discount rate. If a rate is identified but the Regulated Only box is not checked, then this rate applies to all Base NON PIN debit transactions. If the Retail Key Entered/MOTO/Internet/DialPay Business Type is selected, Rewards cards will be charged discount rates plus 0.11% (0.0011) on all transactions. NPC's processing fees and Card Brand interchange fees are included in the discount rate. All other Card Brand fees will be assessed or allocated to Merchant at the then current rate determined in accordance with NPC's standard operating procedures.</p> <p>INTERCHANGE MERCHANTS ONLY - CARD ORGANIZATION FEES: Visa, MasterCard and Discover Interchange fees, assessments and other fees will be assessed or allocated to Merchant at the then current rate determined in accordance with NPC's standard operating procedures.</p> <p>FLAT RATE MERCHANTS ONLY - CARD ORGANIZATION FEES: All fees are included in discount rate and transaction fee above except fees related to International transactions. Does not apply to American Express.</p> <p>AMERICAN EXPRESS - Existing American Express Number YES / NO If Yes, Existing American Express Account Number: Annual Estimated or Actual American Express Volume is less than \$1,000,000.00 / YES NO If No, Merchant is not eligible for the American Express Program.</p> <p>By checking this box, Merchant elects to opt out of the American Express Program</p> <p>By checking this box, Merchant elects to opt out of receiving American Express Marketing Materials.</p>								
SECTION 8: OCCURRENCE FEES								
Batch Fee ¹¹	\$0.25 /per batch	MyMerchantData.com	\$0.00 /month	PCI Program Fee - Annual	\$90.00 /annual			
ACH DBA Change Fee	\$25.00 /each	Minimum Bill	\$25.00 /month	Regulatory and Compliance Fee ¹²	\$0.00 /annual			
On File Fee	\$5.00 /month	Group annual	\$98.00	Charged in the Month of December				
Card Brand Usage Fee (NABU) - MasterCard ¹³	\$0.08 /each	Semi Annual Fee	\$45.00	Charged in the Months of December and 6 months thereafter	PCI Program Fee - Monthly ¹⁴	\$5.95 /month		
Card Brand Usage Fee (NABU) - Visa ¹³	\$0.08 /each				Advantage Buyer Program	\$25.00 /month		
Retrieval Request	\$15.00 /each	Merchant Training	\$0.00 /once	PCI DSS Non-Validation Fee	\$19.95 /each			
Voice Authorization Fee	\$0.85 /each	Welcome Kit	\$0.00 /once	IVR Authorizations	\$0.00 /each			
Chargeback Fee	\$15.00 /each							
<p>Return ACH(s) are subject to a \$25.00 fee for each occurrence.</p> <p>¹¹Same as V/MC/D base transaction fee if left blank; if base V/MC/D transaction fee is left blank, the fee is \$0.30.</p> <p>¹²The initial term of the Merchant Agreement is 3 years and automatically renews for additional 2-year periods. If this Agreement is terminated prior to the expiration of the initial term or any renewal term, you will be subject to an Early Decommission Fee ("EDF") in accordance with the terms of Section 7.B of the Terms and Conditions. If limited by state law, these fees may be modified in accordance with Section 7.B of the Terms and Conditions.</p> <p>¹³The Card Brand Usage Fee (NABU) includes the MasterCard Network Assessment and Brand Usage Fee, the Visa Acquirer Processing Fee, and the Visa Base II Transaction Fee and applies to Tiered Merchants Only.</p> <p>¹⁴See Schedule I of the Terms and Conditions for additional information.</p> <p>¹⁵Merchant may be charged a PCI Non-Compliance fee of \$19.95 per month per MID. Please refer to Section 8.G of the Terms and Conditions.</p> <p>¹⁶See Section 13 of the Terms and Conditions for additional information.</p>								

NPC CMAA 0718.MAG.T1187

Worleypay ISO, Inc. ("NPC") is a registered ISO of Fifth Third Bank, 38 Fountain Square Plaza, Cincinnati, OH 45263

Merchant's Business Name (Legal): AFFORDABLE URGENT CARE LLC

SECTION 10: UNLIMITED PERSONAL GUARANTEE AND CREDIT INFORMATION AUTHORIZATION

PERSONAL GUARANTEE: In exchange for NPC's and Member Bank's acceptance of this Merchant Agreement, each person signing immediately below this paragraph (each such person, a "Guarantor") is signing this Merchant Agreement as a Guarantor of the Merchant identified on page 1 of the Merchant Agreement. By signing below, each Guarantor (i) accepts and agrees to be bound by the Continuing Unlimited Guaranty provisions starting in Section 11 of the Terms and Conditions, and (ii) acknowledges and confirms that, prior to signing, he or she received and read those Continuing Guaranty provisions. Each Guarantor individually authorizes NPC, Member Bank, and/or either of their representatives to conduct an initial and ongoing comprehensive credit investigation of him or her by utilizing a third-party credit reporting agency and/or to obtain a criminal background check. Guarantor acknowledges receipt of the Merchant Agreement, which is incorporated herein by reference as if fully set forth herein and has reviewed the Continuing Unlimited Guaranty provisions therein. Authorized Signature of Guarantor: (Do Not Include Title) _____ Guarantor Name: _____ Date of Signature: _____

Home Address: _____ City, State, ZIP: _____

Date of Birth: _____ Social Security Number: _____ Phone #: _____

SECTION 11: PATRIOT ACT AND BACKGROUND AUTHORIZATION

To help the government fight the funding of terrorism and money laundering activities, the USA Patriot Act requires all financial institutions to obtain, verify and record information that identifies each person (including business entities) who opens an account. What this means for you: When you open an account, we will ask for your name, physical address, date of birth, taxpayer identification number and other information that will allow us to identify you. We may also seek to see your driver's license or other identifying documents. The undersigned entity(ies) and individuals hereby unconditionally authorize NPC and Member Bank or its agents to (i) investigate the information and references contained herein, and to obtain additional information about the Merchant and such individual(s) by pulling credit bureau and criminal background checks on the Merchant and its principals, including obtaining reports from consumer reporting agencies on individual's signing below as an owner or general partner of Merchant, or providing their Social Security Number on the Application (if such individual asks NPC or Member Bank whether or not a consumer report was requested, NPC and/or Member Bank will tell such individual and, if NPC and/or Member Bank received a report, NPC and/or Member Bank will give the individual the name and address of the agency that furnished it) and (ii) update such information periodically throughout the term of service of the Merchant Agreement. By providing your SSN and signing this Application, you, in your individual capacity, unconditionally authorize NPC and Member Bank to obtain your consumer credit report.

SECTION 12: MERCHANT ACKNOWLEDGEMENTS AND SIGNATURE

Merchant agrees to and accepts the terms and conditions set forth in this Application and the Terms and Conditions which are incorporated herein by reference (GEN.0718) as if fully set forth herein (collectively, the "Merchant Agreement") and acknowledges receipt of all parts of the Merchant Agreement. Merchant acknowledges that no handwritten changes have been made to the printed text of the Merchant Agreement and that the parties may produce and rely on a copy or electronically stored image of the Merchant Agreement for all legal purposes. Merchant represents, warrants and certifies to NPC and Member Bank that it has reviewed all pages of this Application, that all information provided herein is true, correct and complete and that NPC and Member Bank may rely on the information contained in this Application, without further investigation, for all purposes. Merchant acknowledges and agrees that NPC and Member Bank are in no way responsible or liable for the actions, inactions, performance or lack of performance of any third party provider or independent sales representative. Merchant represents that it has chosen for itself any services, equipment or third party selected in connection with the Merchant Agreement, and it has not relied on any promises, representations, warranties, or covenants of the independent sales representative, NPC or others. Merchant acknowledges and agrees that the release of Merchant Information in accordance with the provisions of Section 10 of the Terms and Conditions, if Merchant does not want to participate in the American Express Program, the applicable Opt Out Box has been marked.

IN WITNESS WHEREOF Merchant has caused this Agreement to be executed by its duly authorized representative effective in accordance with the terms of the Terms and Conditions. The Agreement shall be binding upon Merchant upon the earlier of Merchant's execution below or Merchant's first processed electronic transaction.

MERCHANT

Signature (Signature may be evidenced by facsimile) *Sunita Pareek* Name (please print) **SUNITA PAREEK** Date **12/11/18**

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Merchant's Business Name (Legal): AFFORDABLE URGENT CARE LLC

SECTION 13: EQUIPMENT SETUP PROVIDER CODE: NPC= NPC to ship equipment SOF = Sales office to ship equipment MER = Merchant owned

TERMINAL	QTY	PROVIDER CODE	PRINTER	PROVIDER CODE	PIN PAD	PROVIDER CODE
Verifone Vx520 Dual Communication Contactless Smart	1	MER				
					NEW EXCHANGE	
					NEW EXCHANGE	
Other:	Provider Code:	Other:	Provider Code:	Other:	Provider Code:	

EQUIPMENT SOFTWARE INFORMATION SOFTWARE NAME PUBLISHER VERSION

EQUIPMENT OPTIONS THE DEFAULT SELECTION WILL BE APPLIED FOR ANY OPTION NOT SELECTED BELOW

RETAIL/MOTO		RESTAURANT		CASH ADVANCE	
AVS	YES NO	Auto-Close++	YES NO		
Last 4-Digits	YES NO	TIME			
CVV ?	YES NO	Store N Forward	YES NO		LOGGING
Purchase Card level 2	YES NO	Pre-Dial	YES NO		FUEL YES NO
Invoice # Prompt	YES NO	Cash Back	YES NO		PASSWORD
PEX Code	8 9	Debit Cash Back Max Amount			All YES NO
Multi-Merchant First Merchant MID					Void YES NO
		++ Auto-Close Time for Alternate Funding needs to be no later than 7:30 p.m. CST			Return YES NO
					Settlement YES NO
					Other

FAST PAY (FPS) Both receipts signature line Both receipts NO signature line NO receipts under \$25.00

Custom Header / Footer: Wireless ID: Comments:

EQUIPMENT SHIPPING INSTRUCTIONS Required ONLY if ordered through NPC - Default shipping options (indicated by) will be applied for any option not selected below

Ship To: Do Not Ship Merchant Location * ISO Location Other

City: State: Zip: Phone #:

Address: Payment For Equipment Will Be: Lease Check Cash Via MC Discover Amex 30 day (Bill Group)

NPC TO REPROGRAM/TRAIN MERCHANT? YES NO

NPC TO SHIP WELCOME KIT? YES NO

WELCOME KIT SHIPPING INSTRUCTIONS Required if welcome kit is shipping to separate address from above

Ship To: Merchant Location * ISO Location Other

Address: City: State: Zip: Phone #: Attn:

SECTION 14: SITE INSPECTION INFORMATION I represent and warrant that the information set forth in the application is true and accurate to the best of my knowledge. In addition, I hereby certify that (check which applies):

I have physically inspected the business premises of the merchant at this address, personally confirmed the identity of the person listed in the Control Owner/Officer Information Section, and witnessed their signing of the Agreement.

An NPC approved third party site inspection vendor will supply inspection within 15 days of my signature below or I have informed NPC that a site inspection is needed.

I have not physically inspected the business premises of the Merchant, but have verified the validity of the business using outside sources and confirmed the identity of the person listed under the Control Owner/Officer Information Section.

If Fulfillment House is used, please complete the following:

Fulfillment House Name and Address: Fulfillment House Contact Information:

Is Fulfillment House PCI DSS Compliant? YES NO

Location Type: Retail Store Front Office Building Residence Industrial Building Trade Show

Organization: IMPACT PAYSYSM LLC Sales Rep Signature: Application Date: 12/11/2018

NPC CMA 8718.MAG.T1437 Workday IBD, Inc. ("NPC") is a registered bank, 35 Fountain Square Plaza, Cincinnati, OH 45263