

Secure Bancard, LLC 1500 Abbey Court | Alpharetta, GA 30004 1-855-271-1500

APPLICATION FOR MERCHANT AGREEMENT

SYNOVUS BANK (Merchant Bank) 1125 First Avenue, Columbus, GA 31901 706-649-4900

Processor's Sales Rep Name: Impact PaySystem CP

| Business Information | | | | | |
|--|--------------------------------------|-----------------------------------|--------------------------|---------------|---|
| Timothy Carey | | | Design Specialties | | |
| Merchant Legal Business Name | | | DBA Name | | |
| PO Box 259 | | | 128 Bee Tree Road | | |
| Mailing Address | | | DBA Address (Physical, N | lo PO Boxes) | |
| Nanticoke | Pennsylvani 18634 | | Shickshinny | | Pennsylvaní£8655 |
| City | State Zip | | City | | State Zip |
| 570-256-3497 | | | 570-256-3497 | | |
| Legal Phone # | Legal Fax # | | DBA Phone # | | DBA Fax # |
| 1260193495 | 28 JYrs. 28 JMos. New bus | siness New owner Seasonal | ? Yes No List mor | nths | |
| Federal Tax ID # (Must be 9 digits) | Length Owned | Dunings Linear | Data On an adv | May 5, 1992 | |
| | | Business License | Date Opened: | | |
| Merchant State registration | E-mail Address: tsc | 1@frontiernet.net Web sit | te Address: | | |
| Any prior | Yes If yes: Personal Busine | ess If yes, how long | | | |
| Type of ■ Sole Prop | rietorship 🔲 LLC 🔛 Partnership 🔲 I | td Partnership Corp. sheet ar | no: Dublic Drivets | Non | Other |
| - , , , o o o o o o o o o o o o o o o o | | Corp, check or | doo mate | | |
| Business Type | | | | | |
| ■ Detail ■ Destaurant ■ Lodging | Service Internet % Ma | il % □ Tel | 04 Pue te Rue | 04 | |
| Retail Restaurant Lought | J Service III internet | 90 <u></u> 1ei | % Bus-to-Bus | 90 | |
| | | | | | |
| Description of Business | | | | | |
| Description of Business | | | | | |
| Detailed Description of Business (i | ncluding products/services; card cha | rging policies; delivery methods; | whether own/finance inve | ntoryprovide | e separate pages if needed): |
| | ncluding products/services; card cha | rging policies; delivery methods; | whether own/finance inve | ntoryprovide | separate pages if needed): |
| Detailed Description of Business (i | | rging policies; delivery methods; | whether own/finance inve | ntoryprovide | separate pages if needed): 570-256-3497 |
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| Detailed Description of Business (i Jewelry Mailing Address (select Le Refund/Return Policy No refund Refund in 30 days American Express Disclosure | egal DBA Location Contact: | Other: | Phone # | | 570-256-3497 |
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PATRIOT ACT REQUIREMENTS - 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 ask to see your driver's license or other identifying documents. Complete Sections I and II and III. (*In Section II, Driver's License required -- use other ID only if no Driver's License issued.) Section II: Individual Form of Identification Section 1: Business Form of Identification Applicable Items Reviewed: Applicable Items Reviewed: **Business Name:** Date and Place of 15894577 Govt Issued Business License Drivers License: Name: **Timothy Carey** Tax Return State ID Date of Birth: Jan. 27, 1953 Corporate Resolution ID/Tax ID Number: 1260193495 Passport: DL/ID#: 15894577 **Entity Agencies** Military ID Date of Issuance: Mexican Consulate **Business financial Statement Expiration Date:** State of Issuance: Partnership Agreement Expiration: Jan 28, 2023 Type Fin'l S't Resident Alien ID: 128 Bee Tree Road Address Section III On site visit done by Sales Rep Business Consistent with Application (including any e-Commerce addendums(s)) DBA Address Address of location inspected: Legal Address ■ URL listed in eCommerce addendum Other Address: Does name posted at business match name on application Ves No Does inventory volume appear to be sufficient? Yes No Does location have appropriate business signage Yes No Are store hours posted? ■ Yes □ No Number of employees:/td> Did you view merchant's inventory? Yes No Get Samples? Yes No Did you get Interior/exterior photos? Yes No Was inventory consistent with merchant's type of business?
Yes Comments: * Signature of Sales Representative: Date * By signing above you hereby acknowledge that the information listed herein is true and accurate and was personally observed on the indicated document, and at the indicated address and (in the case of information listed below in the e-Commerce addendum(s)) indicated URL(s) as applicable. Principal Information Residential Principal's Date of Birth Ownership % of Time Social Security # (Processor's privacy **Residential Address** % / Years Phone # Name Spent In policy for collection and use of social (City, State, Zip) **Business** security numbers can be found at www.securebancard.com) 128 Bee Tree Road, Shickshinny, PA, 70-256-3497 100/28 vrs Timothy Carey Owner ***7776 Bank Information Name of Financial Institution Account number Routing # Phone # Contact Date Opened *****8263 Community Bank 021307559 *AUTHORIZATION FOR AUTOMATIC FUNDS TRANSFER (ACH): The Merchant Bank (defined below) is authorized to initiate or transmit credit and/or debit and/or check entries to the account identified relating to the above account for the services contemplated under this Agreement. Said authority is granted to Merchant Bank's processor and their agents. REQUIRED: ATTACH VOIDED CHECK Please select one for ACH account type listed above: ☐ Checking account ☐ Savings account ☐ Bank GL account Trade / Business References Trade Name Account # Product Sold Phone #' (No 800 #s) Other businesses in which merchant or a principal are now or previously have been involved as owner/operator/director:

2 of 6

PATRIOT ACT / Site Survey

| | 3 of 6 | 1 | Merchant initials | TC |
|--|---|---|------------------------|----------------------------------|
| Processing Information | | | | |
| Card Types Accepted: | All Visa/MasterCard/Discover Cards All Discover Cards JCB** American Express ** Diners/Carte Blanche** | MasterCard Credit Cards and Visa Credit Cards and Busine MasterCard Debit cards only Visa Debit cards only PIN Based Debit/EBT Cards* | ess Cards only | |
| Projected total annual sales \$ Projected Visa/MC/DISC/Amex Sales Monthly \$2500.00 Annual \$ Projected Visa/MC/DISC/Amex High \$5000.00 | Electronic key-entered (with imprints) Electronic card not present (w/out im OR Touch-tone card not present (with im Ficket Touch-tone card not present (no imp Mail/Telephone Order (card not present) | prints) 30 % prints)% rints)% | Do you use a 3rd p | Yes If "yes" and phone number: |
| If applicable, provide: video (TV), aud Do you authorize carrier to deliver w/o How do you advertise? Yellow pag Have you ever accepted credit cards I statements. If you are a MO/TO or e-C Actual chargeback volume for most re # of locations? If yo | ternet: supply copy of print advertising, catalogs and to tape (Radio or IVR), and Web-page screen prints/Lop getting signature? No Yes es Telemarketing Catalog Internet Word or pefore? Yes No If Yes: Processor Name Commerce merchant, please provide most recent 6 most recent 3 months \$ 6 months are affiliated with an existing account, please provide pendent contractors or agents or merchant service pendent pe | JRL(Internet). shi | most recent 3 months o | days? 0-2 days s 60-90 days |
| | | | | |
| Merchant Owns Leases Location Name/address of mortgage holder/landl | | ow long at current locations(s)?: | | |
| Other significant Merchant Contacts with | | | | |
| account. Existing AXP SE #: If you currently accept AXP payments New Accounts: | , and your AXP volume is less than \$1MM annually, y in excess of \$1MM annually, please provide your exi | isting AXP#, so so we can convey this to | AXP on your behalf. | |

If you do not currently have an AXP #, and your annual volume is more than \$1MM, we will contact AXP on your behalf.

In the event your volume exceeds more than \$1MM annually, you may be moved directly to AXP. Opt out of AXP Offers and Promotions: If you do not wish to receive future offers or promotions of AXP products or services from AXP via offline or on-line means (such as traditional mail and telephone), please contact customer service at the phone number listed below. Please note that it may take some time, consistent with applicable law, for us to process your opt-out request.

Call Secure Bancard, LLC Customer Service at: 1-855-271-1500

Merchant has the right not to accept all Card Association card types. Some Point Of Sale software and programs cannot prohibit the acceptance of specific types of payment cards; therefore, it is the merchant's responsibility to enforce this. If you request AXP and qualify, JetPay as processor, and not Merchant Bank, will settle American Express.

^{**} Denotes Services and Programs listed above or below in this Application, which are provided by Processor and its contractors and not by Merchant Bank. Merchant Bank has no responsibility or liability therefor.

Merchant initials TC

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| ** Equipment Option | าร | | | | | | | | | | | | | | | | | |
| , , | | | | | Pur | chase | Puro | chase | | | | Pur | chase | Mer | chant | | | |
| Model | | | | ty | Nev | | Refu | <u>ırbish</u> | ed | Rent | | Oth | er Source | Owr | ned | | _ | Price |
| Terminal | | | | | | | | | | | | | | | | | 1 | |
| Terminal Printer | | | | | | | | | | | | + | | | | 3 | | |
| PIN Pad | | | | | | | | | | | | | | | | | <u>В</u> | |
| Imprinter | | | | | Purc | chase Only | | | | | | | | | | Ì | | |
| Other | SOFTWARE | | | | | | | | | | | | | | | Ş | 8 | |
| | | | | | | | | | | | | | | | | 5 | \$ | |
| Shipping, handling a | nd tay will bo | hillad in ac | Idition to | tho or | auinme | ent price listed | lahovo | | | | | | | | | | | |
| Equipment Billing to: | | billeu iii au | idition to t | | | Agent (| | · | | | | | | | | | | |
| Ship Equipment to: | | | | | | egal Agent | | er: | | | | | | | | | | |
| Send Welcome Kit to |): | | | DB | BA 🔲 L | egal 🗌 Agent | N/A | | | | | | | | | | | |
| Merchant training pro | ovided by: | | | Pro | ocesso | r Agent | Other: | | | | | | | | | | | |
| SERVICE ACCEPT | ANCE AND E | EE SCHE | DUE | | | | | | | | | | | | | | | |
| | Interchange Pa | | | Rate | n 35 | % Per Item \$ | 0.15 | | ■ Association | n Dues & | ass∆ S | ssment | s Pass Through | | | | | |
| | - Interestating Te | _ | | | | 70 1 01 110111 4 | 0.10 | | | | | | | | | | | |
| Rate 1 | | % | Per Item \$ | _ | ate 2 | | | | % | Per Ite | em \$ | Rate 3 | 2 12 15 | | | % | Р | Per Item \$ |
| Visa Qual Credit | | | | _ | | Qual Credit | | | | | | | on-Qual Credit | | | 0.15 | 4 | |
| Master Card Qual Credit | | 0.35 | 0.15 | | | d-Card Qual Credit | | | | | | | Non-Card Qual Credit | | | 0.15 | _ | |
| Discover Network - PayPal | | | | _ | | letword - PayPal N | | Credit | | | | | er Network - PayPal No | | dit | 0.15 | | |
| American Express Qual Cre | edit | | | An | merican I | Express Mid-Qual | Credit | | | | | America | an Express Non-Qual (| Credit | | 0.15 | | |
| Visa Qual Debit | | | | Vis | sa Mid-ζ | Qual Debit | | | | | | Visa No | on-Qual Debit | | | 0.15 | | |
| Master Card Qual Debit | | | | Ma | aster Ca | rd Mid-Qual Debit | | | | | | Master | Card Non-Qual Debit | | | 0.15 | | |
| Discover Network - PayPal | Qual Debit | | | Di | scover N | letwork - PayPal M | 1id-Qual [| Debit | | | | Discove | er Network - PayPal No | n-Qual Debi | it | 0.15 | | |
| Pin Debit | | | | EE | ВТ | | | | | | | Star | | | | \$1 per mo | nth | |
| Rewards Pricing | | | | | | | | | | | | | | | | | | |
| Visa Rewards (Disco | ount Rate \$ | Per It | em | | | | | MC V | Vorld Card (| Discou | nt Rat | e \$ | Per Item | | | | | |
| Amex Rewards (Disc | | Per | Item | | | | | | over Reward | | | | Per Item | | | | | |
| Non-Bankcard Type | os Assented | | | | | | | | | | | | | | | | | |
| Non-Bankcaru Type | es Accepteu | | | | | | | | | | | | | | | | | |
| JCB Card % | | Diners | Carte B | lanch | ne% | | | Ame | rican Expre | ss Disc | count | rate% | OF | ₹ | | | | |
| | | | | | | | | | | | | | | | | | | |
| Monthly Flat Fe | ee: \$ | | Monthly (| Gross | s Pay | Daily 0 | iross F | ay 🔲 | Retail \$ | Trai | ns Fe | e + | _% OR 🗔 | | _ | | | |
| Est. Annual Ame | X Volume: \$_ | lone | | | | Est. Ave | erage A | Amex T | Non icket: \$ | ie | | | | | | | | |
| AMEX Pay Freque | ency 🔲 3 d | day | 15 day | , | 30 | day <u>Amex</u> | Fees d | isclos | ed in this se | ection | are bi | lled by | / American Expr | ess | | | | |
| | | | | | | | | | | | | | | | | | | |
| Miscellaneous Fees | 5. | | | | | | | | | | | | | | | | | |
| Monthly Statemer | nt Fee \$ | Applica | tion/Setu | ıp Fe | No e \$ | ne ACH Rej | ect/Cha | ange F | ee \$ | Onlir | ne Me | rchan | t Portal \$ | monthly | | | | |
| Chargeback/Retri | ieval Fee \$ <u>25</u> . | .00/15. @ach | Monthl | y Min | nimum | : \$ None V | oice A | uth/AF | RU Fee \$ 1.95 | <u> </u> | ACH F | ee \$ <u></u> | loneea | ch | | | | |
| ACH Debit \$1.00 l | Upon Accour | nt Approva | al AVS F | ee \$ | None | each CVV2 F | ee \$ | eac | h Tokenizat | ion Fe | No e \$ | ne eacl | n Annual Fee \$_ | one | | | | |
| ** Administrative | Maintenance | Fee \$ | emon | thly * | * PCI | Non Complia | nce Fe | e \$ | emonthl | y ** Ga | iteway | y Fee s | None monthl | у | | | | |

_____None None Per _____ Description

See Sections 13.b.iv and 18 of the Agreement for other fees that may be assessed due to the action or inaction of Merchant.

** Other \$_____ per ____ Description

Early Termination Fee: \$ _____ ** PCI monthly Fee \$ ____

Authorization Fees: \$ None American Express \$ MasterCard \$ Visa \$ Discover \$

| Marchant initials | TC |
|-------------------|----|
| Merchant initials | 10 |

| eCommerce Application | n Addendum | | | | | | | |
|-------------------------------|------------------|--------------------------|------------|---------------------|-------------------------------|--|-------------|----------------------------|
| Number of e-Commerc | ce websites: | | (If more t | han 1, complete, in | itial and attach an addition | al copy of this page for each addition | al website) | |
| Website URL: | | Website serv Address: | /er IP | | Website DBA: | | | |
| Customer Service: em | ail address: | tsc1@frontie | rnet.net | Telephone: | 570-256-3497 | List all links to other websites: | | |
| Web Hosting Service | Name: | | | Address: | | Contact Telephone: | | |
| Fullfillment House Na | ne: | | | Address: | | Contact Telephone: | | |
| How do you advertise | : | | | | (Attach samples; e.g., o | catalog/print/broadcast/telemarket | ing script) | |
| Do you bill customer's Yes No | card before ship | pping product | or perfor | ming service? | If Yes, how many days before? | | | |
| What is your return/re | fund policy? | | | | Website Security Metho | od: | | |
| Digital Certificate Issu | er: | | | | Digital Cert No(s)/Exp [| Date(s) | | venership ed Individual |

5 of 6

For purposes of this application, "Processor" is Secure Bancard, LLC, 1500 Abbey Court, Alpharetta, GA 30004 and can be contacted at 1-855-271-1500 and "Merchant Bank" is Synovus Bank, 1125 First Avenue, Columbus, GA 31901, 706-649-4900.

Merchant Signatures and Guarantor Signatures

Agreement Signature: By signing below, each of the Merchant and Guarantor(s) and Merchant principal(s) and owner(s) (1) certifies, under penalty of perjury, that all information and documents submitted with this Application are true and complete; (2) authorizes Merchant Bank, Processor and their respective agents to verify any of the information given, including credit references, and to obtain individual and/or business credit reports, including requesting reports from consumer reporting agencies on persons signing below as a principal or owner of Merchant or as a Guarantor (if such person asks Merchant Bank or Processor whether or not a consumer report was requested, Merchant Bank or Processor will tell such person, and if Merchant Bank or Processor received a report, Merchant Bank or Processor will give such person the name and address of the agency that furnished it); (3). acknowledges receipt of the Merchant Card Processing Agreement ("Agreement") including the Continuing Guaranty ("Guaranty") contained within the Agreement, and of the CNP Addendum, Special Services Addendum and the Merchant Use and Disclosure of BIN Information Addendum (each, an "Addendum"), each of which documents is incorporated herein by this reference, and agrees to be bound by and perform in accordance with all provisions, terms and conditions of the Agreement, the Guaranty, and each such Addendum; (4) agrees to be bound by and perform in accordance with all terms, conditions and provisions of any Merchant Card Processing Agreement between any Merchant Affiliate of Merchant and Processor and its agents and Merchant Bank ("Merchant Affiliate Agreement"), regardless of whether such Merchant Affiliate Agreement currently exists or is executed, amended, or supplemented at some future date; (5) agrees that Processor and its agents and Merchant Bank may rely upon copies or facsimiles of this Application bearing Merchant's and Guarantor(s)'s signatures, or on copies or facsimiles of other documents bearing Merchant's and Guarantor(s)'s sig

AMERICAN EXPRESS - In the event I am not eligible for JetPay and Secure Bancard's OptBlue program for American Express, by signing below, I represent that I have read and am authorized to sign and submit this application for the above entity, which agrees to be bound by the American Express® Card Acceptance Agreement ("American Express Agreement"), and that all information provided herein is true, complete, and accurate. I authorize JetPay, Secure Bancard, and American Express Travel Related Services Company, Inc. ("American Express") and American Express's agents and Affiliates to verify the information in this application and receive and exchange information about me personally, including by requesting reports from consumer reporting agencies from time to time, and disclose such information to their agent, subcontractors, Affiliates and other parties for any purpose permitted by law. I authorize and direct Secure Bancard and American Express and American Express's agents and Affiliates to inform me directly, or inform the entity above, about the contents of reports about me that they have requested from consumer reporting agencies. Such information will include the name and address of the agency furnishing the report. I also authorize American Express to use the reports on me from consumer reporting agencies for marketing and administrative purposes. I am able to read and understand the English language. Please read the American Express Privacy Statement at http://www.americanexpress.com/privacy to learn more about how American Express your privacy and how American Express uses your information. I understand that I may opt out of marketing communications by visiting this website or contacting American Express at 1-800-528-5200. I understand that upon American Express' approval of the application, the entity will be provided with the American Express Agreement and materials welcoming it to American Express' Card acceptance program.

Guaranty: The undersigned Guarantor(s), individually and severally, guarantee the full and faithful performance and payment by the Merchant (identified above in the portion of this Application which precedes this Guaranty) of each and all of Merchant's duties and obligations to Merchant Bank and Processor, as provided in Section 25 of the Merchant Card Processing Agreement, which Merchant Card Processing Agreement, and this Application and the Addendums mentioned above, are incorporated into this Guaranty by this reference.

| MERCHANT SIGNATURES | | GUARANTOR SIGNATURES | |
|------------------------------|---------------|---------------------------------|---------------|
| XII Timothy Cc | Feb. 10, 2021 | XII Timothy Cc | Feb. 10, 2021 |
| Principal/Owner for Merchant | Date | Guarantor Signature (No Titles) | Date |
| Timothy Carey | Owner | Timothy Carey | |
| Print Name | Title | Print Name (No Titles) | |
| X 2) | | X 2) | |
| Principal/Owner for Merchant | Date | Guarantor Signature (No Titles) | Date |
| | | | |
| Print Name | Title | Print Name (No Titles) | |
| X 3) | | X 3) | |
| Principal/Owner for Merchant | Date | Guarantor Signature (No Titles) | Date |
| | | | |
| Print Name | Title | Print Name (No Titles) | |
| | | | |
| FOR INTERNAL USE ONLY | | | |
| X) | | X) | |
| Accepted by Processor | Date | Accepted by Merchant Bank | Date |
| | | | |
| Print Name | Title | Print Name | Title |

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Merchant Beneficial Ownership and Management Information Certification: The following information and certifications concerning beneficial ownership, and the identification of beneficial owner(s), of the Merchant identified in the Merchant Application referenced below, must be provided for the Merchant if a legal entity (legal entity includes a corporation, limited liability company or other entity that is formed by filing of a public document with a Secretary of State or similar office, a general partnership, and any similar business entity formed in the United States). (This form need not be used for a Merchant identified in the Merchant Application as a "sole proprietor" or "sole proprietorship", provided the prescribed forms of Merchant Application including any Patriot Act/customer identification forms and taxpayer identification/withholding forms included therein or prescribed for use therewith reflect such sole proprietorship status and are completed and executed by such sole proprietor and the Processor's representative.) The beneficial ownership/management information and certification in this form is in addition to, not a substitute for, the information and certifications regarding the Merchant legal entity required elsewhere in the prescribed form of Merchant Application including any other Patriot Act/customer identification forms and taxpayer identification/withholding forms included therein or prescribed for use therewith. Notice: 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 busines).

| entities) who opens an account. What this means for you: When you open a will allow us to identity you. We may also ask to see your driver's license or confirm the information. Secure Bancard's privacy policy can be found at http:// | in account we will ask for your nother identifying documents. In | ame, address, some instance | date of birth, and | other information tha |
|--|---|--|--|---|
| Section 1: Merchant Application Information (Must match information in Merch Feb. 10, 2021 | nant Application): Date Application | Signed (by Auth | orized Signer nam | ed below): |
| Merchant Legal Name: Timothy Carey Merchant Federal Tax ID (as it a | ppears on income tax return): 12 | 60193495 Me | rchant State of forn | nation/Incorporation: |
| PA Merchant Address: 128 Bee Tree Road, Shickshinny, PA, 18655 | | Merchan | t Entity Type | |
| Sole Proprietor | | | | |
| Section 2: Beneficial Ownership and Management Information. Provide the ir arrangement, understanding, relationship or otherwise, owns 25% or more of the individuals does not exceed 50% of the equity interests of the Merchant, provide t individuals for which information is provided below exceeds 50%. (Use extra copic managing the legal entity listed in Section 1, a "Control Prong". Examples of a Co Chief Operating Officer, Managing Member, General Partner, President, Vice Pre column as the Control Prong, the Control Prong section below must be completed. | equity interests of the Merchant let the information below on additional es if needed.) Information must be ntrol Prong include, but are not lim sident or Treasurer. If no other Bei | gal entity identifi beneficial owne provided for one | ed above. If the tot ers so that the total e individual with sig | al ownership of those ownership interests of unificant responsibility for |
| Beneficial Owner Legal Name Timothy Carey | Title Owner | | | % of Legal Entity OwnerShip: 100 % |
| Individual's Home (Street) Address (No P.O. Box) 128 Bee Tree Road | City, State, Zip Shickshinny, PA, 18655 | | | Date of birth Jan. 27, 1953 |
| Individual has a Social Security Number or Individual Taxpayer Identification Number issued by US Government? ■ Yes ■ No | (SSN)/Individual Taxpayer Ide | entification No. (| ITIN): | Control Prong? |
| Id Type:* ■ Driver's License □ Other State photo ID showing residence □ Passport □ Resident Alien ID □ Other ID ± | State/Country of Issuance PA | Date Issued Dec. 5, 2018 | Expiration Date Jan. 28, 2023 | Number on ID: 15894577 |
| Beneficial Owner Legal Name | Title | L | | % of Legal Entity OwnerShip: None % |
| Individual has a Social Security Number or Individual Taxpayer Identification Number issued by US Government? ☐ Yes ■ No | (SSN)/Individual Taxpayer Ide | entification No. (| ITIN): | Control Prong? |
| Id Type:* Driver's License Other State photo ID showing residence Passport Resident Alien ID Other ID ± | State/Country of Issuance | Date Issued None | Expiration Date None | Number on ID: |
| Beneficial Owner Legal Name | Title | | · | % of Legal Entity OwnerShip: None % |
| Individual's Home (Street) Address (No P.O. Box) | City, State, Zip | | | Date of birth None |
| Individual has a Social Security Number or Individual Taxpayer Identification Number issued by US Government? ☐ Yes ■ No | (SSN)/Individual Taxpayer Ide | entification No. (| ITIN): | Control Prong? |
| Id Type:* Driver's License Other State photo ID showing residence Passport Resident Alien ID Other ID ± | State/Country of Issuance | Date Issued None | Expiration Date None | Number on ID: |
| Beneficial Owner Legal Name | Title | | 1 | % of Legal Entity OwnerShip: None % |
| Individual's Home (Street) Address (No P.O. Box) | City, State, Zip Shickshinny, , | | | Date of birth None |
| Individual has a Social Security Number or Individual Taxpayer Identification Number issued by US Government? ☐ Yes ☐ No | (SSN)/Individual Taxpayer Ide | entification No. (| ITIN): | Control Prong? |
| Id Type:* Driver's License Other State photo ID showing residence Passport Resident Alien ID Other ID ± | State/Country of Issuance | Date Issued None | Expiration Date None | Number on ID: |
| Control Prong (and/or additional Beneficial Owner) Legal Name Timothy Carey | Title Owner | <u> </u> | | % of Legal Entity OwnerShip: 100 % |
| Individual's Home (Street) Address (No P.O. Box) 128 Bee Tree Road | City, State, Zip Shickshinny, PA, 18655 | | | Date of birth Jan. 27, 1953 |
| Individual has a Social Security Number or Individual Taxpayer Identification Number issued by US Government? ■ Yes ■ No | (SSN)/Individual Taxpayer Ide ****7776 | entification No. (| ITIN): | Control Prong? |
| Id Type:* ■ Driver's License □ Other State photo ID showing residence □ Passport □ Resident Alien ID □ Other ID ± | State/Country of Issuance PA | Date Issued Dec. 5, 2018 | Expiration Date Jan. 28, 2023 | Number on ID: 15894577 |
| *For US persons provide unexpired Driver's License unless there is none; for non Country of issuance. ± Specify type of "Other ID", which may be any other unexpiphotograph or similar safeguard. | | | | |
| Certifications and Signatures: The undersigned Authorized Signer, listed above as a Beneficial Owner or Controt that he/she is authorized to open accounts for the Merchant at financial institution and that, to the best of his/her knowledge, all information provided above about exindirectly owns 25% or more of the Merchant legal entity's equity interests whose Representative, each hereby certify that the information listed above regarding the correct and was personally observed on the indicated document. | s, that all information provided aboach individual listed above is compinformation is not provided above. | ove about the Me plete and correct The Authorized | erchant legal entity and there is no inc Signer and the Pro | is complete and correct dividual who directly or ocessor's |
| Timothy Cc Feb. 10, Timothy Carey | | | | |
| Authorized Signer Date Signature | Signed Authorized Signer Printed | Name Process | | Date Signed |

VISA DISCLOSURE PAGE

Member Bank (Acquirer) Information:

Acquirer Name: Synovus Bank

Acquirer Address: 1125 First Avenue, Columbus, GA 31901

Acquirer Phone: (706) 649-4900

Important Member Bank (Acquirer) Responsabilities:

- 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 (signatory) to the Merchant Agreement.
- 3. The Visa Member is responsible for and must provide settlement funds to the Merchant.
- 4. The Visa Member is responsible for all funds held in reserve that are derived from settlement.
- 5. The Visa Member is responsible for educating Merchants on any Visa International Operating Regulations with which Merchants must comply during the course of operation.

Important Merchant Responsibilities:

- 1. Ensure compliance with cardholder data security and storage requirements.
- 2. Maintain fraud and chargebacks below thresholds.
- 3. Review and understand the terms of the Merchant Agreement.
- 4. Comply with Visa International Operating Regulations.

The responsibilities listed above do not supersede 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.

| Merchant Signature | |
|-------------------------|---------------|
| | |
| | |
| Time the Cr | Feb. 10, 2021 |
| | Date |
| | |
| Timothy Carey | Owner |
| Merchant's Printed Name | Title |