NEW COMPANY APPLICATION

COMPANY INFORMATION • DBA NAME: Burke Motor G	roup										
CONTACT NAME: Alexis Neal											
◆DBA ADDRESS TYPE: BSA ◆ DBA ADDRE	SS1 (NO PO B	ox): 227 B	Bavberry Dr								
DBA Address 2:	`	,	,,								
◆CITY: Cape May Court House	♦ ZIP CODE:	082	10								
◆Country of Primary Business Operations:	USA				-		002	.10			
◆Business Country of Formation: USA	00/1					♦ DBA Phon	NE #: 1	809-465-	6000	n	
◆EMAIL ADDRESS: alexis.neal@burkemo	otoraroup	com				DBA FAX #:		000 400	000	<u> </u>	
YEAR ESTABLISHED: 1912	otorgroup.										
YEAR ESTABLISHED: 1912 MOBILE PHONE #: 609-443-3964 ◆ LENGTH OF CURRENT OWNERSHIP: 99 YEARS, 11 MONTHS											
CIP EXEMPTION:		MOITING									
BENEFICIAL OWNER EXEMPTION: NON											
OTHER ADDRESS (IF DIFFERENT THAN	AROVE)					<u> </u>					
/,	SEE ALSO S	PECIAL I NSTR	RUCTIONS (MO	RE THAN ONE OF	TION M	MAY BE SELECTED)					
LOCATION NAME: Burke Motor Grou	ıp qı					PHONE #:					
Contact:						Fax #:					
Address:			CITY:		l .	STATE: ZIP CODE:					
STATEMENTS/ RETRIEVALS / CHARGEBACKS											
STATEMENTS: DBA OR Mailing OR W-9 Auto Send: Yes No (Chain companies only – must include chain set up form)											
RETRIEVALS: MAIL TO: DBA MAILING	OR FAX TO	: 🗩 DBA [MAILING OR E	MAIL To: alex	kis.ne	eal@burkemoto	rgrou	p.com <u>OR</u>		Online Case Manage	ЕМЕПТ (ОСМ)
CHARGEBACKS: MAIL TO: DBA MAILING	AND FAX TO): 🖸 DBA [MAILING OR E	MAIL To: alex	xis.ne	eal@burkemoto	rgrou	p.com <u>or</u>		ONLINE CASE MANAGE	ЕМЕНТ (ОСМ)
PRINCIPAL 1 INFORMATION (INCLUDE								DIARY BUSIN	ESS) (ON THE ADDL OWNERS	SHIP FORM)
◆ ■ BENEFICIAL OWNER: PERCENTAGE OF			☐ AUTHORIZ	ZED SIGNER		Sole Proprietor	!				
♦ ADDITIONAL BENEFICIAL OWNERS? NO	K RESPON	SIBLE PARTY	1			IF OTHER: ♦ LAST NAME: Burke					
♦ FIRST NAME: Raymond		► MIDDLE N			♦ LA	AST NAME: BUIK	e				
◆ADDRESS TYPE: PRA ◆ADDRESS (NO PC) BOX): 44 ²	1						1			
♦City: Avalon				♦ ZIP/POSTAL	CODE	ODE: 08202					
◆DOB: 04/05/1953 PREVIOUS ADDRESS IF CURRENT ADDRESS IS LESS THAI	N 2 VEARS	♦US PER	son: Yes					▶PHONE #	#: 60	09-463-3541	
► HOME ADDRESS:	VZ TEARO		▶CITY:				▶STA	TE:		▶ZIP CODE:	
▶ID TYPE: SSN		▶ID#: 1	44404942			▶IF OTHER-	· ID Ty	PE:			
▶IF OTHER ID #: ▶IF OTH	ER ID - COUN				▶ IF (OTHER GOVERNME	ENT ISS	UED - ID NA	ME:		
OTHER COMPANY INFORMATION											
◆ AVERAGE SALE AMOUNT: \$ 600						CARD PRESEN	т 100%	6	Оми	NI COMMERCE (MUST T	готаl 100%)
♦ HIGH SALE AMOUNT: \$ 15000						CARD NOT PRE		100%*	CAR	D PRESENT	90 %
◆ Number of High Sales (above) Annually: 9	<u> </u>					☐ INTERNET 100			CAR	D NOT PRESENT*	<u>10</u> %
◆ TOTAL MONTHLY VISA/MC/AMEX/DISC/UNIONPAY SALES: \$ 200000						☐ OMNI COMMERCE INTERNET*			0 %		
♦ANNUAL REVENUE:\$ 2400000						INTERNET: PROD	UCT W	EBSITE:			
♦INDUSTRY TYPE: RE											
◆ DESCRIPTION OF PRODUCT/SERVICES OFFERED: Auto dealership Internet: "Contact Us" email: alexis.neal@burkemotorgroup								orgroup.com			
	SPECIAL PROGRAM MCC ONLY: 5511B						*CUSTOMER SERVICE PHONE # AND PREVIOUS PROCESSOR REQUIRED BELOW				
When does the customer receive the produc IF not same day, 0 # of Days (include sh		C 0	ame day			► CUSTOMER SERVICE PHONE #: 609-465-6000 ► PREVIOUS PROCESSOR: Heartland Payment Services					
IF SEASONAL, PLEASE CHECK MONTHS <u>CLOSED</u> BELO	ow. (Custoi	MER MUST CO	NTACT CUSTOMER	SERVICE TO D		VATE AND REACTIV				JUNE	
☐ JULY ☐ AUGUST		☐ SEPTEMB	BER	П Остове	R		Nove	MBER		☐ DECEMBER	

____Initials 2 USA-MSP-ELV-0319

BANK ACCOUNT (CHECKING ACCOUNTS ONLY)										
◆DEPOSIT BANK NAMESTURDY SAVINGS BANK	♦ ABA/Routing #	±231271284	◆ DDA ACCOUNT #: 9400043213							
BILLING BANK NAME (IF DIFFERENT):	ABA/ROUTING #:		DDA ACCOUNT #:							
CHARGEBACK BANK NAME (IF DIFFERENT):	ABA/ROUTING #:		DDA Account #:							
TAPE ID (OPT): 14		☐ Fast Track Funding								

CARD ACCEPTAN	NCE (PLEASE	E CHECK EA	ACH CARD YOU WISH TO	O ACCEPT.)		PRICING CATEGORY			
			AMERICAN	DISC VER MasterCa	UnionPay VISA	RETAIL	☐ MO/TO / INTERNET		
X ALL VISA/MAS	TERCARD/AN	/IEX/UnionI	Pay/Discover*	(Masiler Ca	報联	RESTAURANT	☐ ARU		
						LODGING	OMNI COMMERCE		
						SUPERMARKET	(TIERED & EICP ONLY)		
🗶 VISA CREDIT 🕍 V	-								
PRICING INFORM							FEES	T .	
	ARE FOR ALL C	CARD ACCEPT	TANCE TYPES SELECTED. A	ALL CARD BRAND ASS	ESSMENTS WILL BE PASSED THE	ROUGH AT COST.	APPLICATION FEE	\$ O	
☐TIERED☐ FIXED OR	Vı	ISA	MASTERCARD	DISCOVER*	UNIONPAY	AMERICAN EXPRESS		\$0	
☐ ENHANCED IC PLUS	RATE (%) + P	ER ITEM (\$)	RATE (%) + PER ITEM (\$)	RATE (%) + PER ITEM	(\$) RATE (%) + PER ITEM (\$)	RATE (%) + PER ITEM (RETURN ITEM FEE/NSF (PER OCCUR)	\$10	
QUALIFIED	%+\$		%+ \$	%+\$	%+ \$	%+ \$	ACCOUNT MAINTENANCE	\$ O	
MID QUALIFIED	%+\$		%+ \$	%+\$	%+\$	%+\$	CHARGEBACK (PER OCCUR)	\$15	
Non Qualified	%+\$	<u> </u>	%+ \$	%+\$	%+\$	%+ \$	ANNUAL FEE START DATE:	\$ O	
OTHER TIER	☐ CHECK CAI	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	C-req) ☐ SPRMKT (T-op —% + \$	ot/EIC-NA)	S/SMALL TKT <i>(T-opt/EIC-NA)</i> % + \$	%+\$	MONTHLY MINIMUM	\$ O	
REWARDS TIER (T-opt / EIC-req)	%+\$		%+ \$	%+\$		%+\$	MONTHLY SERVICE FEE	\$9.95	
COMMERCIAL	۵/ ۵		۰, ۰	۵, ۵	0/ 🏚	٥/ ٨	OTHER:	\$0.000	
CARD TIER (T-opt /EIC-req)	%+\$	<u> </u>	%+ \$	%+\$	%+ \$	%+ \$	OTHER:	\$0.000	
PASS THRU:	Vis	6A	MASTERCARD	DISCOVER*	UnionPay	AMERICAN EXPRESS	OTHER:	\$0.000	
OR IC PLOS	RATE (%) + P	(- ,	RATE (%) + PER ITEM (\$)	RATE (%) + PER ITE	()	, , , ,	' I	\$0.000	
MARKUP	0 <u>.25</u> _{%+}	<u>\$ 0.0</u> 00	0 <u>.25</u> _{%+ \$ 0.000}	0 <u>.25</u> _{% + \$ 0}	<u>.0</u> 00 0 <u>.25</u> _{%+ \$} 0.00	0 0 <u>.25</u> _{% + \$ 0.00}	O STATEMENT: LECTRONIC PAPER	OR	
DIFFERENTIAL	Vis	iA .	MASTERCARD	DISCOVER*	UnionPay	AMERICAN EXPRESS			
DIT EKENTAL	RATE (%) + P	PER ITEM (\$)	RATE (%) + PER ITEM (\$)	RATE (%) + PER ITE	EM (\$) RATE (%) + PER ITEM (\$	RATE (%) + PER ITEM (MONETARY PROGRAM:		
QUALIFIED	%+	· \$	%+ \$	%+\$	%+ \$	%+ \$	AUTH PROGRAM: 49160		
NON QUALIFIED	%+	· \$	%+ \$	%+\$	%+ \$	%+ \$	EQUIPMENT: 59999		
			**	PAYPAL ACCEPTANCE A	*Discover includes JCB, D ND RATES ARE BASED ON CARD S	I, PAY PAL PAYMENT DEVICE	** MISCELLANEOUS: 59999		
AUTHORIZATIONS (F	PER OCCURREN	ICE)	<u> </u>	TATI AL AGGLI TARGE A	IND KATEO AKE BAOLD ON GARD O	WILE TRANSPORTER	SAFE T SERVICES BUNDLE		
VISA		0.050	UNIONPAY	\$ 0.050	Voice Auth Touch Tone	\$ 0.65	ASSOC COMPLIANCE	1	
MASTERCARD		0.050	WEX	\$ 0.050	VOICE- OPERATOR ASSISTED		SAFE T SILVER		
DISCOVER		0.050	DIAL COMMUNICATION	\$ <u>0.050</u>	Voice – with AVS	\$ 2.2	☐ SAFE T GOLD ☐ SAFE T Solo	\$7.00	
AMEX	\$	0.050	OTHER:	\$	VOICE – BANK REFERRAL	\$ <u>4</u>	Per month, taxes and other fees may apply, see company representation and certifications)		
PIN DEBIT							•		
			ASS THROUGH (ICPLS)	,	re) Auth : Pass Throu	GH (INTERCHANGE PLUS M.	ARKUP) FIXED (FLAT RATE)		
			R ITEM (\$)% + \$		PIN DEBIT MONTHLY FEE S	· 			
INTERLINK 0.00%			MAESTRO <u>0.00</u> % + \$		UPDBT <u>0.00</u> % + \$ 0.00		CCEL <u>0.00</u> % + \$ 0.00 AUTH \$		
AFFN <u>0.0</u> 0% + \$_0			ALASKA <u>0.0</u> 0% + \$ <u>0.0</u>		CU24 <u>0.00</u> % + \$ <u>0.00</u>		TS <u>0.00</u> % + \$ <u>0.00</u> AUTH \$ <u>0</u>	.05	
NYCE <u>0.00</u> % + \$0	0.00 AUTH \$ <u>(</u>	0.05	PULSE <u>0.0</u> 0% + \$ <u>0.0</u> 0	<u>0</u> Аитн \$ <u>0.05</u>	SHAZAM <u>0.00</u> % + \$ <u>0.00</u>	<u>)</u> Аитн \$ <u>0.05</u> s	TAR <u>0.00</u> % + \$ <u>0.00</u> AUTH \$ <u>0</u>	.05	
OTHER CARD T	YPES EXIST	ΓING							
AMEX SE#(10 DIGITS):		PER AUTH: \$	EBT SE#(7 DIGITS): F	PER AUTH: \$	☐ WEX (ADDITIONAL PAPERWORK R	EQ.)	
OTHER SF #			PER AUTH: \$	OTHER SE#	·	PER AUTH: \$	☐ VOYAGER (ADDITIONAL PAPERWO	RK REQ.)	

3

POINT	OF SALE (EQUIPMI	ENT OR S	OFTWARE)												
NETWOR	KK: ELAV	on \square	OTHER	A THIRD	PARTY INTE	EGRATOR WILL BE US	SED FOR IMPLEMEN	NTATION:					Сомм	MUNICATION M	ETHOD (IP D	EFAULT): DIAL
VAR S	ERVICE PROV	IDER (HO	STED):		VAR	(DISTRIBUTED):	VENDOR:			PRODUCT:			VERSION:			
# OF TIE	Os:		TID TYPE	(OMNI ONLY):				# OF TI	Ds:		TID TY	PE (OMNI (ONLY):			
QTY	POS DESCR	IPTION		ITEM CODE	TID TYPE OMNI ONLY	PRICE PER UNIT	MONTHLY FEI	E TE	ASE** RM ONTHS)	ANNUAL FEE PER UNIT	PER AUTH	Purch		LEASE**	EXISTIN	G EXCHANGE
4	POYNT	TERN	/I HW	POYNT	ONET	\$ 0.00	\$	(101	5141110)	\$	\$	•]			\top
						\$	\$			\$	\$					
						\$	\$			\$	\$]			
						\$	\$			\$	\$]			
						\$	\$			\$	\$]			
						\$	\$			\$	\$]			
SURCHARGES CREDIT CARD SURCHARGING IS PROHIBITED IN THE FOLLOWING STATES: CO, CT, KS, MA, ME AND OK CREDIT CARD SURCHARGING RATE 3.00% (ONLY AVAILABLE FOR TETRA DESK 3500, TETRA DESK 5000 OR TETRA MOVE TERMINALS) CREDIT SURCHARGE TO MERCHANT ALL APPLICABLE STATE AND LOCAL TAXES WILL BE APPLIED. SALES TAX EXEMPT (ADDITIONAL DOCUMENTATION REQUIRED)																
	SE NOTE THAT A			MPLETE THE SEC TDAY AIR		W. INITIALS ARE REQ DAY AIR		AVON E	BILLS ONE	TIME FEES						
Elavon a	nd Member have	no responsi	bility for, and s	shall have no liabili	ty to Compan	ny in connection with, an er, even if Elavon collect	y hardware or softwa	are, or any	related serv	rices, Company re	ceives under a din	ect agreem	ent (inclu	iding any sale,	warranty or e	end-user license
	•	pany ana a	ama party, mo	adding drift value 7	DESCRIP		is 1000 or dillor dilloc			TUP FEE	ANNUAL			ONTHLY FE	P	ER AUTH FEE
ADDITION SERVICE	ONAL POS								\$		\$		\$		\$	
-									\$		\$		\$		\$	
													Softv	VARE/WIRE	LESS	
		Qтү	POS DESCRIPTION			ITEM CODE	TID TYPE Omni Only	:		THLY RATE R UNIT	ANNUAL PER UN		Mon Fee I	PER S	ETUP/ IM CARD EE PER UNIT	PER AUTH FEE
RENTA	L								\$		\$		\$	\$	i	\$
EQUIP	MENT:								\$		\$	\$		\$		\$
									\$		\$		\$	\$	i	\$
									\$		\$		\$	\$		\$
Rentals cancelled within the first 24 months will be charged a \$200 restocking fee. Rentals may result in paying more for the equipment over time as compared to purchasing. Rental equipment may be new or used and is dependent on inventory available at time of order. All used equipment is inspected and refurbished upon return before being re-deployed. Rentals are month to month and may be terminated at any time by Company. Additional provisions around the use of rental equipment can be found in the Equipment Chapter of the Operating Guide: a link to the Operating Guide can be found in Section 5 of this Application, below.																
	AIL (AUTO CLO			•	Quick C	ERGE — THIS INFOR LOSE			AND FOR		□ No S	SIGNATUR	E	☐ CONTA	CTLESS (+ N	O SIGNATURE)
	TAURANT (QUIC					ON (DEFAULT)		FINE				FUNCTION	1			
	D NOT PRESEN M PROMPTS:	II (AUTO C		•	QUICK C		☐ CASH BACK PIN DI		•	AX) CLOSE DEFAU	LT) L QUI	CK STAY				
(Сиѕтом Р	PROMPTS COULD RES		■ NO TIP (REST) INO SER		(REST) CLERK PRO		E SECURIT			☐ TIP FUNCTION W	AITER (RTL				
TRAININ	IG (DEFAULT =	No Train	ING):	TRAINING	PHONE	INFORMATION: ACC	ESS #:		CONTAC	T NAME:			CONTA	ACT PHONE #	:	
X I understand that I am entering into a																
owed in to time.	accordance w A lease paym	vith the lea ent (wheth	ise, as appli ier paid by o	cable, by initiati debit or other me	ng debit er eans) that i	on ("Lessor"), to auto ntries to Company's is not honored by Ba en notice from Comp	account at the fin ank for any reason	ancial ir n will be	stitution ("	Bank") indicate	d hereon or suc	ch other fi	nancial	institution u	sed by Cor	npany from time
▶BANK	NAME:					►ABA/Routin	IG #:				▶DDA A	ACCOUNT	#:			
LADCO	VENDOR CO	DE:					LEASE PLAN:									
REPO	RT TOOLS															
	P ONLY OF	_	MCP WITH		ONTHLY F		SET UP FEE \$		# Us	SERS	SET UP TY	PE (CHE	CK ONE) MID	☐ CHN	☐ ENT
☐ AC	S	Мо	NTHLY FEE	\$	Set U	P FEE \$	REMOTE I	ID	<u> </u>							

____Initials

South Processor Description Descript	SUBSTITUTE FORM W-9											
ELLIC RESIDENTIAL THAT COLVENING THAT COLVENING SERVICE AND CONTROL CONTROL COLVENING COLVENING SERVICE AS SERVICE OF CONTROL COLVENING SERVICE AS SERVICE AS SERVICE OF CONTROL COLVENING SERVICE AS SERVICE AS SERVICE OF CONTROL COLVENING SERVICE AS SERVICE OF CONTROL COLVENING SERVICE AS SERVICE OF CONTROL COLVENING SERVICE AS SERVICE AS SERVICE OF CONTROL COLVENING SERVICE AS SERVICE												
Lincold Business Advances (No Po Books)												
Tourise Cape May Court House Sinite Number Security May Court House Security May Court House												
Leady Disputation of the Company (April 1997) 227 31933986												
Company Representations and Destrictions and Supervision Company Representations of impresentations by suggestion to the control of the company of the co												
Company Representations and Certifications. By spling layers the apparent of a company spling layers and certifications. By spling layers the apparent of a company spling layers and the layers of the company and the spling layers of the company and the spling layers of the company spling layers of the com	` '	<u> </u>	1 .		Ι Ι '		22-31	39386				
Congray (Congray) and this propriet price of the price of	City: Cape May Court House St	ATE: NJ	ZIP: (08210		TIN (SOCIAL SECURITY #):						
Copyany (Chrypany's) and its experientatives (representatives) representatives (representatives) representatives (representatives) representatives (representatives) representatives (representatives) and company application ("Correpsy Application") is to an and complete and properly reflected to butteriors. Proceedings of the butteriors. Proceedings of the corresponding of the butteriors. Proceedings of the corresponding of the butteriors. Proceedings of the process of the Correpsy Application of the Agricuments. Further, by organic plants, moreous, not formed and company application and the Agricuments. Further, by organic plants, moreous, not formed and proceedings of the corresponding of the	5											
Recording To 37:200 (collectively, "we of "us") that is all information provided the concepts and produced to the company of the company deplication or Company Application are duly authorized to be provided the persons giring this Company Application are duly authorized to be in Company application, or the company and the Company application are duly authorized to application, or the company and the Company application are duly authorized to application, or the company and the Company application are duly authorized to application, or the Company according to the Company and a company of the Company application are duly authorized to application and a company and a company application are duly and a company applic	company ("Company") and its representative(s) re	present and warrant to Elav	on, Inc.	Transaction. Receipt of								
in the basiness, francisal consistion, and principal garmenes, someses, or officers of Company, and in praparos agrings of Company (a principal garmenes) and the praparos agrings of Company (a principal garmenes) and the praparos agrings of Company (a principal garmenes) and the praparos agrings of Company (a principal garmenes) and the praparos agrings of Company (a principal garmenes) and the praparos agrings of Company (a principal garmenes) and the praparos agrings of Company (a principal garmenes) and the praparos agrings of Company (a principal garmenes) and the praparos agrings of Company (a principal garmenes) and the praparos agrings of Company (a principal garmenes) and the praparos agrings of Company (a principal garmenes) and the praparos agrings of Company (a principal garmenes) and the praparos agrings of Company (a principal garmenes) and the praparos agrings of Company (a principal garmenes) and the praparos agrings of Company (a principal garmenes) and the praparos agrings of Company (a principal garmenes) agrings of Company (a principal garmenes) agrincipal garmenes (a principal garmenes) agrings of Company (a principal garmenes) agrings of Company (a principal garmenes) agrincipal garmenes (a principal garmenes) agrings of Company (a principal garmene	Knoxville, TN 37920 (collectively, "we" or "us") that (i) all information provided All companies must comply with the requirements of the Payment Card Industry Data Security Standards											
account agroves, or in subsequent version or to selected the arriversion by an experimental production of the control of the c	the business, financial condition, and principal partners, ow	ers, or officers of Company	; and (ii)	PCI DSS compliance on	ืลก annเ	ual basis, with initial validation to	occur no I	ater than ninety (90) days after				
one Formore (*TOS*) unduring where issuing equipment, and has beat aposptusity to review such them. (*TOS*) containing a mandation and internation of the property of the pro	provisions of this Company Application and the Agreement.	Further, by signing below,	Company	account approval, or in s	ubseque	ent years on or before the annive	ersary date	of account approval, will be				
affects and conditions. The signature by an authorized operanders of the Company Application in the signature by an authorized operanders of a Transaction Recognity or other revidence of the Recognity of Transaction Recognity or other revidence of the Recognity of Transaction Recognity or other Vision Recognition (Inc.) and the Recognition Recognition (Inc.) and the Recognition Recogniti	the Terms of Service ("TOS"), including when leasing equip	nent, and has had an oppo	rtunity to	compliance. Company n	nay be e	eligible for Data Breach Financial	Assistanc	e Coverage following account				
1. The number shown on this Company Application is my correct tapager identification number companies of the companies of th					ompilan	ice validation. Gee the FOI Gorn	pliance i it	ogram Overview for assistance				
Agreement including, without limitation, the Company Application, the TOS and the Operating Quide incorporation developed in the proposed and observed to the revolution of the Company Application company to the Internal Revenues service (RES) that I am abulgate to backup withholding, and a continuates service contract conditions are service contract to obtain a copy and review operating used as our understands of the Company Application of the Polyment Networks, and understands that failure to comply will result in resultance of the Polyment Networks, and understands that failure to comply will result in resultance of the Polyment Networks, and understands that failure to comply will result in resultance of the Polyment Networks, and understands that failure to comply will result in resultance of the Polyment Networks, and understands that failure to comply will result in resultance of the Polyment Networks, and understands that failure to comply will result in resultance of the Polyment Networks, and understands that failure to comply will result in resultance of the Polyment Networks, and understands that failure to comply will result in resultance of the Polyment Networks, and understands that failure to comply will result in resultance of the Polyment Networks and the							orrect tax	payer identification number				
withholding as a result of a failure to report all interests or of rividends, or (c) he RR has notified me and the Land of the Company reports or			erating				exempt from	om backup withholding, or (b)				
that I am no longer subject to backup withholding, and some not have access to were the 120 or Operating Guide. Or operand pollution, and the source of the 120 person of the												
A. The FATCA code(s) entered on this form (if any) indicating I am exempt from FATCA reporting is Northerlanding any non-recipit of the ICOS or Operating allowing. Company agrees to correct regulations of the Payment Networks, and understands that failure to comply will result in termination of processing services. Capital invites otherwise defined in the Correary Application, have the same meaning ascribed to them in the ICOS and Operating Outlet. IMPORTAN invited intelligence of the Payment Networks, and understands that failure to comply will result in the Correary Application, have the same meaning ascribed to them in the ICOS and Operating Outlet. IMPORTAN invited intelligence of the Payment Networks, and containing intelligence of the payment of the pay								.,				
regulations of the Payment Networks, and understands that failure to comply will result in termination of processing services. Capitalized learns shall, unless otherwise defined in the termination of processing services. Capitalized learns shall unless otherwise defined in the termination of processing services. Capitalized learns shall unless otherwise defined in the termination of processing services. Capitalized learns shall unless otherwise defined in the termination of processing services. In the same receiving assistance to the same receiving assistance of the same receiving assistance to the same receiving assistance to the same receiving assistance to expend the same receiving assistance to expend a processing of the same receiving agency to complete information that definition is not because the same receiving agency to complete information that designation may be accomplished by a facilitation reports on credit reports or other fassignation in reports on credit reports or other fassignation in reports on credit reports or other fassignation in reports on credit reports or other fassignation of investigation reports on credit reports or other fassignation of investigation reports on credit reports or other fassignation of investigation reports on credit reports or other fassignation of investigation reports on credit reports or other fassignation or processing agency to complete information to incomplete information for such communication may be willness and to furnish that information to use and the same reports of the fassignation of the fassignation of investigation reports on credit reports or other fassignation of the fastignation of the fastig			omply		entered	on this form (if any) indicating	g I am exe	mpt from FATCA reporting is				
termination of processing services. Capitalized terms shall unless otherwise defined in the company Application, have the same meaning sacrible of them in the TCS and Operating Guide. MBORT ANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT. To the company and company												
MPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT. To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to both, welly, and record information and institutions to both, welly, and record information and institutions to both, welly, and record information and institutions to both, welly, and record information in the funding of terrorism and money laundering activities, Federal law requires all financial institutions to both, well, and record information in the funding of terrorism and account. This means we will ask for certain information in the funding of the company and the protein the confidence of the company and the control information from the company and the control incompany, and to both the confidence and any or other background investigation reports on each of the company, and to both the other difference and or other background investigation reports on each of them that we consider necessary to review other background investigation reports on each of them that we consider necessary to review person or credit reporting, agency to complete information to use the previous of the background investigation reports on each of them that we consider necessary to review person or credit reporting, agency to complete information to use the same of training that information to use the same of the same of the company application, believing executed counterparts and considerance of agency and the same of the same	termination of processing services. Capitalized terms shall,	ınless otherwise defined in	this	Application), in addition t	o all oth	ner terms of this Agreement, Com	npany agre	es to the Acceptance Program				
help the government fight the funding of terrorism and money laundering activities. Fooderal law requires all financial institutions to obtain, verify, and record information that information in studies are contained. The proposed property of the company and the proposed property of the	Guide.	·	•	Payment Device, Compa	any expr	ressly authorizes Elavon to subm	it America	n Express® Transactions to,				
person who opens an account. This means we'will ask for centain information and identifying documents to allow us to identifyly out. Company and tist expressnatively glauthorize us prior to our acceptance of this Company Application and from time to time therefalter, to investigate the incividual and business history and background of Company, each such representative and any or the individual and business history and background of Company, each such representative and any or the individual and business history and background of Company, application and rom time to time the information to use the sea sindicated in Section 1 of this Company Application and communication in the expression of the provided and communication in the company of Elevan may be an ordinated the company of the company of Elevan may be an ordinated and ordinated the company of the company of Elevan may be entitled to important information to us. This Company Application may be signed in one or more counterparts, each of which shall constitute an ordinated and official and all of which, alken together, all constitutes an ordinated and incident of the company Application shall constitute a signed original. This Company Application believes of executed counterparts of this Company Application and all original and all of which, alken together, all communities and the same Company Application shall constitute a signed original. The theorem is described the company Application and all original and all of which, alken together, all company and provided and the same company application shall constitute a signed original. The theorem is described to the standard American Express is a mineral constitute and constitute a signed original. The theorem is the company Application or the described to the standard American Express is a mineral c	help the government fight the funding of terrorism and mon-	y laundering activities, Fed	eral law	Elavon to provide Compa	any's co	ontact information to American Ex	press, and	Company agrees that				
our acceptance of this Company' Application and from time to time thereafter, to investigate the individual and bushers shistory and background of Company, each such representative and yother officers, partners, proprietors, and/or owners of Company, and to obtain credit reports or the background for comment in the such consideration for such communications may be withdrawn at your person or credit reporting agency to compile information to assembly and the such assembly assembly and the such assembly asse	person who opens an account. This means we will ask for o	ertain information and ident	ifying	by applicable Laws, inclu	uding to	communicate with Company reg	arding pro	ducts, services, and resources				
ther officers, partners, proprietors, and/or owners of Company, and to obtain credit reports or other background investigation reports on each of them that we consider necessary to review the acceptance and continuation of this Company Application. Company also authorizes any topers or or credit reporting agency to complete information to answer those credit inquiries and to furnish that information to us. This Company Application on you be signed in one or more counterparts, each of which shall constitute an original and all of which, taken together, shall constitute an original and all of which, taken together, shall constitute an original and all of which, taken together, shall constitute an original and all of which, taken together, shall constitute an original and all of which, taken together, shall constitute an original and all of which, taken together, shall constitute an original and all of which, taken together, shall constitute an original and all of which, taken together, shall constitute an original and all of which, taken together, shall constitute an original and all of which, taken together, shall constitute a signed facility or the same company application. Delivery of executed counterparts of this Company Application may be acceptance of American Expressed Payment Devices pursuant to this Agreement. Solely with respect to the terms and conditions applicable to Company's acceptance of American Expressed Payment Devices pursuant to this Agreement, solely with respect to the terms and conditions applicable to Company's acceptance of American Expressed Payment Devices pursuant to this Agreement, solely with respect to the terms and conditions applicable to Company's acceptance of American Expressed Payment Devices pursuant to the terms and conditions and the same conditions and the sa	our acceptance of this Company Application and from time	time thereafter, to investi	gate the	provided above is subject	t to the	consent to such use as indicated	d in Section	n 1 of this Company Application.				
the acceptance and confinuation of this Company Application. Company also authórizes any person or credit reporting agency to compile information to answer throat of furnish that information to us. Company Application may be signed in one or more counterparts, each of which shall constitute an original and all of which, taken together, shall constitute one and the same Company Application and person or credit furnish that information to us. The Application shall constitute an original and all of which, taken together, shall constitute one and the same Company Application and the Acceptance Program, Company and Shall constitute an original and all of which, taken together, shall constitute on original and all of which, taken together, shall constitute on original and all of which, taken together, shall constitute on original and all of which, taken together, shall constitute on the company Application may be accomplished by a facesimile transmission, and a signed facesimile or copy of this Company Application and the Acceptance Program, Company and Shall constitute as program, which may these different fearings and international constitutes are program, which may these different fearings are intereded third-party beneficiary of this Agreement, solely with respect to the terms and conditions applicable to Company's acceptance of this Agreement. Company Application and the Acceptance Programs of the Acceptance Programs and additions as an interded third-party beneficiary of this Agreement, solely with respect to the terms and conditions than the Acceptance Programs and additions as an interded third-party beneficiary of this Agreement, solely with respect to the terms and conditions applicable to Company application and the Acceptance Programs and additions a				any time by contacting of	ur custo	omer service center. Even if conse	ent is with	drawn, Company may still				
this Agreement. Company Application may be signed in one or more counterparts, each of which shall constitute an original and all of which, taken together, shall constitute one and the same Company Application. Delivery of executed counterparts of this Company Application may be acceptance program, which may be enrolled in the standard American Express card acceptance program, which may be enrolled in the standard American Express card acceptance program, which may be enrolled in the standard American Express card acceptance program, which may be enrolled in the standard American Express is an intended third-party beneficiary of this Agreement, solely a fassimile transmission, and a signed fassimile or copy of this Company be a fassimile transmission, and a signed fassimile or copy of this Company application or shall constitute a signed original. **The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding, in addition, by signing this Company Application, you beneficial owner(s) and/or the Individual with control over the legal entity customer is complete and accurate. **SIGNATURE: X** **PRINTED NAME:** *				Company or Elavon may	termina	ate Company's acceptance of Am	nerican Ex	press® Payment Devices at any				
This Company Application may be signed in one or more counterparts, each of which shall constitute an original and all of which, taken together, shall constitute one and the same complianed withich, taken together, shall constitute one and the same complianed by a facisimile transmission, and a signed facisimile or copy of this Company Application. Delivery of executed counterparts of this Company Application shall constitute a signed original. *By signing this document below you are agreeing on behalf of the Company to a complance of American Express) Payment Devices, and that American Express is an intended third-party beneficiary of this Agreement, solely with respect to the terms and conditions applicable to Company's acceptance of American Express is an intended third-party beneficiary of this Agreement, solely with respect to the terms and conditions applicable to Company application shall constitute a signed original. *By signing this document below you are agreeing on behalf of the Company to the company application, you hereby certify that to the best of your knowledge, the information provided about the beneficial owner(s) and/or the individual with control over the legal entity customer is complete and accurate. *SIGNATURE: X **PRINTED NAME:** **PRINTED NAME:** **Raymond Burke** **PRINTED NAME:** **PRESONAL GUARANTY* **As a primary inducement to us cacept this Company Application, the undersigned Guarantor(s), by signing the Company Application, jointy and severally, unconditionally and irrevocably, quarantee the continuing full and faithful performance and payment by Company of each of its duties and obligations to us (including, without limitation, Chargebacks and obligations in connection with Leased Equipment, if applicable) pursuant to the Company Application and Agreement, as may be amended from time to time, with our without notice. Guarantor(s) understand that the inducement to us to accept this Company Application is consideration for the quarantor (see the origination of the Guaran		nswer those credit inquirie	s and to									
Company Application. Delivery of executed counterparts of this Company Application may be accomplished by a facishille transmission, and a signed facishile or copy of this Company Application shall constitute a signed original. *By signing this document below you are agreeling on behalf of the Company to a mandatory binding arbitration provision set forth in the TOS and expressly incorporated herein. *The Internal Revenue Service does not require your consent to any provision of this document other than the Revenue Service does not require your consent to any provision of this document other than the regular of the Company Application, you hereby certify that to the best of your knowledge, the information provided about you, the name and address provided for the legal entity customer; and the information provided about the beneficial owner(s) and/or the individual with control over the legal entity customer is complete. **SIGNATURE: X** **PRINTED NAME: Raymond** **Raymond** **PRINTED NAME: Raymond** **Raymond** **PRINTED NAME: Raymond** **PRINTED NAME: Raymond** **TITLE: - Select One - DATE: **TITLE: - Select One - DAT				acceptance program, wh	ich may	have different terms and condition	ons than tl	ne Acceptance Program, and				
Application shall constitute a signed original. American Express® Payment Devices, and that American Express has the right to enforce such terms and conditions direy against Company. By signing this document below you are agreeing on behalf of the Company to a mandatory binding arbitration provision set forth in the TOS and expressly incorporated herein. The Internal Revenue Service does not requive your consent to any provision of this document other than the certifications required to avoid backup withholding. In addition, by signing this Company Application, you hereby certify that to the best of your knowledge, the information provided about you, the name and address provided for the legal entity customer, and the information provided about the beneficial owner(s) and/or the individual with control over the legal entity customer is complete and accurate. BIGNATURE: X PRINTED NAME: Raymond Burke TITLE: Partner/Principal DATE: TITLE: Select One - DATE: PERSONAL GUARANTY As a primary inducement to us to accept this Company Application, the undersigned Guarantor(s), by signing the Company Application, jointly and severally, unconditionally and irrevocably, guarantee the continuing full and faithful performance and payment by Company of each of its duties and obligations to us (including, without limitation, Chargebacks and obligations in connection with the leased Equipment, if applicable) pursuant to the Company Application and Agreement, as may be amended from time to time, with or without notice. Quarantor(s) understand further that we may proceed directly against Guarantor(s) without first exhausting our remedies against any other person or entity responsible therefore to them or any security held by us or Company. This guarantee will not be discharged or affected by the death of the Guarantors, will bind all heirs, administrators, representatives and aemded from time to time, with or without notice. Quarantor(s) understand further that we may proceed directly against Company Application is consi												
*By signing this document below you are agreeing on behalf of the Company to a mandatory binding arbitration provision set forth in the TOS and expressly incorporated herein. *The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding. In addition, by signing this Company Application, you hereby certify that to the best of your knowledge, the information provided about you, the name and address provided for the legal entity customer, and the information provided about the beneficial owner(s) and/or the individual with control over the legal entity customer is complete and accurate. **SIGNATURE: X*** **PRINTED NAME:** **PRI		imile or copy of this Comp	any									
Company Application, you hereby certify that to the best of your knowledge, the information provided about you, the name and address provided for the legal entity customer, and the information provided about the beneficial owner(s) and/or the individual with control over the legal entity customer is complete and accurate. SIGNATURE: X PRINTED NAME: Raymond Burke TITLE: Partner/Principal DATE: TITLE: - Select One - DATE: DATE: PERSONAL GUARANTY As a primary inducement to us to accept this Company Application, the undersigned Guarantor(s), by signing the Company Application, jointly and severally, unconditionally and irrevocably, guarantee the continuing full and faithful performance and payment by Company of each of its duties and obligations to us (including, without limitation, Chargebacks and obligations in connection with Leased Equipment, if applicable) pursuant to the Company Application and Agreement, as may be amended from time to time, with or without notice. Guarantor(s) understand further that we may proceed directly against Guarantor(s) without first exhausting our remedies against any other person or entity responsible therefore to them or any security held by us or Company. This guarantee will not be discharged or affected by the death of the Guarantors, will bind all heirs, administrators, representatives and assigns and may be enforced by or for the benefit of any of our successors. Guarantor(s) understand further that we understand that the inducement to us to accept this Company Application for the guaranty remains in full force and effect even if the Guarantor(s) receive no additional benefit from the guaranty. The undersigned hereby directs any consumer reporting agency to furnish a consumer credit report that relates personally to the undersigned upon the request of Elavon or any of its designees, successors or assigns and agrees that all parties involved are in compliance with the Fair Credit Reporting Act. PRINTED NAME: Raymond Burke PRINTED NAME: Natasa Cvijanovic REP ID #: 41	* By signing this document below you are agreeing on	ehalf of the Company to	a mandato				sly incorp	porated herein.				
SIGNATURE: X PRINTED NAME: TITLE: - Select One - DATE: PERSONAL GUARANTY As a primary inducement to us to accept this Company Application, the undersigned Guarantor(s), by signing the Company Application, jointly and severally, unconditionally and irrevocably, guarantee the continuing full and faithful performance and payment by Company of each of its duties and obligations to us (including, without limitation, Chargebacks and obligations in connection with Leased Equipment, if applicable) pursuant to the Company Application and Agreement, as may be amended from time to time, with or without notice. Guarantor(s) understand further that we may proceed directly against Guarantor(s) without first exhausting our remedies against any other person or entity responsible therefore to them or any security held by us or Company. This guarantee will not be discharged or affected by the death of the Guarantor(s, will bind all heirs, administrators, representatives and assigns and may be enforced by or for the benefit of any of our successors. Guarantor(s) understand that the inducement to us to accept this Company Application is consideration for the guaranty remains in full force and effect even if the Guarantor(s) receive no additional benefit from the guaranty. The undersigned hereby directs any consumer reporting agency to furning agency to fu	Company Application, you hereby certify that to the best	t of your knowledge, the	informatio	n provided about you, the	name a	and address provided for the le						
PERSONAL GUARANTY As a primary inducement to us to accept this Company Application, the undersigned Guarantor(s), by signing the Company Application, jointly and severally, unconditionally and irrevocably, guarantee the continuing full and faithful performance and payment by Company of each of its duties and obligations to us (including, without limitation, Chargebacks and obligations in connection with Leased Equipment, if applicable) pursuant to the Company Application and Agreement, as may be amended from time to time, with or without notice. Guarantor(s) understand further that we may proceed directly against Guarantor(s) without first exhausting our remedies against any other person or entity responsible therefore to them or any security held by us or Company. This guarantee will not be discharged or affected by the death of the Guarantors, will bind all helist, administrators, representatives and assigns and may be enforced by or for the benefit of any of our successors. Guarantor(s) understand that the inducement to us to accept this Company Application is consideration for the guaranty remains in full force and effect even if the Guarantor(s) receive no additional benefit from the guaranty. The undersigned hereby directs any consumer reporting agency to furnish a consumer credit report that relates personally to the undersigned upon the request of Elavon or any of its designees, successors or assigns and agrees that all parties involved are in compliance with the Fair Credit Reporting Act. SIGNATURE: X PRINTED NAME: Raymond Burke DATE: SUBMITTED BY (SALES USE ONLY) To the best of my knowledge, I certify that the information provided in this Company Application was provided by the Company and is true, complete and accurate. I further certify that the signatures were provided by the Company's owner(s) or officer(s), as appropriate. SALES REP SIGNATURE: X PRINTED NAME: Natasa Cvijanovic REP ID #: 41816 DATE: 12/01/2019	Signature: X	PRINTED NAME: R	aymon	d Burke		TITLE: Partner/Princip	oal	DATE:				
As a primary inducement to us to accept this Company Application, the undersigned Guarantor(s), by signing the Company Application, jointly and severally, unconditionally and irrevocably, guarantee the continuing full and faithful performance and payment by Company of each of its duties and obligations to us (including, without limitation, Chargebacks and obligations in connection with Leased Equipment, if applicable) pursuant to the Company Application and Agreement, as may be amended from time to time, with or without notice. Guarantor(s) understand further that we may proceed directly against Guarantor(s) without first exhausting our remedies against any other person or entity responsible therefore to them or any security held by us or Company. This guarantor will not be discharged or affected by the death of the Guarantors, administrators, representatives and assigns and may be enforced by or for the benefit of any of our successors. Guarantor(s) understand that the inducement to us to accept this Company Application is consideration for the guaranty and that this guaranty remains in full force and effect even if the Guarantor(s) receive no additional benefit from the guaranty. The undersigned hereby directs any consumer reporting agency to furnish a consumer credit report that relates personally to the undersigned upon the request of Elavon or any of its designees, successors or assigns and agrees that all parties involved are in compliance with the Fair Credit Reporting Act. SIGNATURE: X PRINTED NAME: Raymond Burke DATE: SUBMITTED BY (SALES USE ONLY) To the best of my knowledge, I certify that the information provided in this Company Application was provided by the Company and is true, complete and accurate. I further certify that the signatures were provided by the Company's owner(s) or officer(s), as appropriate. SALES REP SIGNATURE: X PRINTED NAME: Natasa Cvijanovic REP ID #: 41816 DATE: 12/01/2019	SIGNATURE: X	PRINTED NAME:				TITLE: - Select One -		DATE:				
As a primary inducement to us to accept this Company Application, the undersigned Guarantor(s), by signing the Company Application, jointly and severally, unconditionally and irrevocably, guarantee the continuing full and faithful performance and payment by Company of each of its duties and obligations to us (including, without limitation, Chargebacks and obligations in connection with Leased Equipment, if applicable) pursuant to the Company Application and Agreement, as may be amended from time to time, with or without notice. Guarantor(s) understand further that we may proceed directly against Guarantor(s) without first exhausting our remedies against any other person or entity responsible therefore to them or any security held by us or Company. This guarantee will not be discharged or affected by the death of the Guarantors, will bind all heirs, administrators, representatives and assigns and may be enforced by or for the benefit of any of our successors. Guarantor(s) understand that the inducement to us to accept this Company Application is consideration for the guaranty and that this guaranty remains in full force and effect even if the Guarantor(s) receive no additional benefit from the guaranty. The undersigned hereby directs any consumer reporting agency to furnish a consumer credit report that relates personally to the undersigned upon the request of Elavon or any of its designees, successors or assigns and agrees that all parties involved are in compliance with the Fair Credit Reporting Act. SIGNATURE: X PRINTED NAME: Raymond Burke DATE: SUBMITTED BY (SALES USE ONLY) To the best of my knowledge, I certify that the information provided in this Company Application was provided by the Company and is true, complete and accurate. I further certify that the signatures were provided by the Company's owner(s) or officer(s), as appropriate. SALES REP SIGNATURE: X PRINTED NAME: Natasa Cvijanovic REP ID #: 41816 DATE: 12/01/2019												
with Leased Equipment, if applicable) pursuant to the Company Application and Agreement, as may be amended from time to time, with or without notice. Guarantor(s) understand further that we may proceed directly against Guarantor(s) without first exhausting our remedies against any other person or entity responsible therefore to them or any security held by us or Company. This guarantee will not be discharged or affected by the death of the Guarantors, will bind all heirs, administrators, representatives and assigns and may be enforced by or for the benefit of any of our successors. Guarantor(s) understand that the inducement to us to accept this Company Application is consideration for the guaranty and that this guaranty remains in full force and effect even if the Guarantor(s) receive no additional benefit from the guaranty. The undersigned hereby directs any consumer reporting agency to furnish a consumer credit report that relates personally to the undersigned upon the request of Elavon or any of its designees, successors or assigns and agrees that all parties involved are in compliance with the Fair Credit Reporting Act. SIGNATURE: X PRINTED NAME: Raymond Burke DATE: SUBMITTED BY (SALES USE ONLY) To the best of my knowledge, I certify that the information provided in this Company Application was provided by the Company and is true, complete and accurate. I further certify that the signatures were provided by the Company's owner(s) or officer(s), as appropriate. SALES REP SIGNATURE: X PRINTED NAME: Natasa Cvijanovic REP ID #: 41816 DATE: 12/01/2019	As a primary inducement to us to accept this Com											
be discharged or affected by the death of the Guarantors, will bind all heirs, administrators, representatives and assigns and may be enforced by or for the benefit of any of our successors. Guarantor(s) understand that the inducement to us to accept this Company Application is consideration for the guaranty and that this guaranty remains in full force and effect even if the Guarantor(s) receive no additional benefit from the guaranty. The undersigned hereby directs any consumer reporting agency to furnish a consumer credit report that relates personally to the undersigned upon the request of Elavon or any of its designees, successors or assigns and agrees that all parties involved are in compliance with the Fair Credit Reporting Act. SIGNATURE: X PRINTED NAME: Raymond Burke DATE: SUBMITTED BY (SALES USE ONLY) To the best of my knowledge, I certify that the information provided in this Company Application was provided by the Company and is true, complete and accurate. I further certify that the signatures were provided by the Company's owner(s) or officer(s), as appropriate. SALES REP SIGNATURE: X PRINTED NAME: Natasa Cvijanovic REP ID #: 41816 DATE: 12/01/2019	with Leased Equipment, if applicable) pursuant to	he Company Application a	nd Agreem	ent, as may be amended fro	om time	to time, with or without notice. G	uarantor(s) understand further that we				
benefit from the guaranty. The undersigned hereby directs any consumer reporting agency to furnish a consumer credit report that relates personally to the undersigned upon the request of Elavon or any of its designees, successors or assigns and agrees that all parties involved are in compliance with the Fair Credit Reporting Act. SIGNATURE: X PRINTED NAME: Raymond Burke DATE: SUBMITTED BY (SALES USE ONLY) To the best of my knowledge, I certify that the information provided in this Company Application was provided by the Company and is true, complete and accurate. I further certify that the signatures were provided by the Company's owner(s) or officer(s), as appropriate. SALES REP SIGNATURE: X PRINTED NAME: Natasa Cvijanovic REP ID#: 41816 DATE: 12/01/2019	be discharged or affected by the death of the Guarantors, w	II bind all heirs, administrat	ors, represe	entatives and assigns and n	nay be e	enforced by or for the benefit of a	any of our	successors. Guarantor(s)				
SIGNATURE: X PRINTED NAME: Raymond Burke DATE: SIGNATURE: X PRINTED NAME: PRINTED NAME: DATE: SUBMITTED BY (SALES USE ONLY) To the best of my knowledge, I certify that the information provided in this Company Application was provided by the Company and is true, complete and accurate. I further certify that the signatures were provided by the Company's owner(s) or officer(s), as appropriate. SALES REP SIGNATURE: X PRINTED NAME: Natasa Cvijanovic REP ID #: 41816 DATE: 12/01/2019	benefit from the guaranty. The undersigned hereby directs	any consumer reporting age	ency to furn	ish a consumer credit repor								
SIGNATURE: X PRINTED NAME: SUBMITTED BY (SALES USE ONLY) To the best of my knowledge, I certify that the information provided in this Company Application was provided by the Company and is true, complete and accurate. I further certify that the signatures were provided by the Company's owner(s) or officer(s), as appropriate. SALES REP SIGNATURE: X PRINTED NAME: Natasa Cvijanovic REP ID #: 41816 DATE: 12/01/2019		involved are in compliance			Burke)		DATE:				
SUBMITTED BY (SALES USE ONLY) To the best of my knowledge, I certify that the information provided in this Company Application was provided by the Company and is true, complete and accurate. I further certify that the signatures were provided by the Company's owner(s) or officer(s), as appropriate. SALES REP SIGNATURE: X PRINTED NAME: Natasa Cvijanovic REP ID #: 41816 DATE: 12/01/2019	SIGNATURE: X		1	-				DATE:				
To the best of my knowledge, I certify that the information provided in this Company Application was provided by the Company and is true, complete and accurate. I further certify that the signatures were provided by the Company's owner(s) or officer(s), as appropriate. SALES REP SIGNATURE: X PRINTED NAME: Natasa Cvijanovic REP ID #: 41816 DATE: 12/01/2019												
provided by the Company's owner(s) or officer(s), as appropriate. SALES REP SIGNATURE: X PRINTED NAME: Natasa Cvijanovic REP ID #: 41816 DATE: 12/01/2019	To the best of my knowledge. I certify that the information of			, ,	v and is	strue complete and accurate 1 fr	irther certi	fy that the signatures were				
		riate.					u 101 001ll	r, a.a. are orginatures were				
REP PHONE #: REP EMAIL: natasa@teslapayments.com ELAVON USA-MSP-ELV-1018	SALES REP SIGNATURE: X	PRINTED NAME: N	latasa C	Cvijanovic	R	REP ID #: 41816		DATE: 12/01/2019				
	REP PHONE #:	REP EMAIL: nata	sa@tes	slapayments.com			ELAVON (JSA-MSP-ELV-1018				

NEW COMPANY APPLICATION - VALUE ADDED SERVICES

(This page of the New Company Application is only required when enrolling for the Value Added Services listed below.)

COMPANY INFORMATION										
DBA NAME: Burke Motor Group										
CONTACT NAME: Alexis Neal	DBA PHONE #: 609-465-6000									
DBA ADDRESS 1 (NO PO BOX): 227 Bayberry Dr	DBA Address 2:									
CITY: Cape May Court House STATE: NJ	ZIP CODE: 08210									
ELECTRONIC CHECK SERVICE										
►ANNUAL CHECK VOLUME: \$ ►AVERAGE CHECK AMOUNT: \$	MAXIMUM CHECK AMOUNT: \$ ►ECS MONTHLY MINIMUM: \$									
ECS- PAPER CHECK CONVERSION	,									
PROCESSING OPTIONS: □ POP (POS IMAGE) □ CONVERSION WITH GUARANTEE	GUARANTEE RATE: % PER TRANSACTION: \$									
☐ ARC (POS IMAGE) ☐ CONVERSION W/ VERIFICATION <u>Or</u> PER TRA	ANSACTION: \$ PER RETURN TRANSACTION: \$ COLLECTIONS									
BOC CONVERSION ONLY ACH CHECK - CHECK NOT PRESENT (CNP)										
Programma Options	ACH-ECHECK WITH VERIFICATION PER TRANSACTION: \$ PER RETURN TRANSACTION: \$									
<u> </u>	ACH-ECHECK CONVERSION ONLY PER TRANSACTION: \$ PER RETURN TRANSACTION: \$									
OTHER ECS CHECK CONVERSION SERVICES REQUESTED										
□ PROMPTS FOR DRIVER'S LICENSE (IF NOT SELECTED, INFORMATION MUST BE OBTAINED ON CHECK FOR GUARANTEE SERVICE) □ ENQUIRE REPORTING ACCESS: # OF USERS @ \$29.95 EACH □ ENQUIRE REPORTING ACCESS: # OF USERS @ \$29.95 EACH □ SPECIFIED SERVICE FEE AMOUNT: □ \$15 (DEFAULT) OR □ SPECIFIED SERVICE FEE AMOUNT \$ SPECIFIED										
PER MONTH	,									
ACH CHECK QUESTIONNAIRE 1. WHAT TYPES OF PAYMENTS WILL YOU ACCEPT USING ACH-ECHECK (E.G., UTILITY BILL PAYMENTS, MONTHLY RENT PAYMENTS, MONTHLY BILLING FOR GENERAL SERVICES)? 2. WILL YOU OBTAIN AUTHORIZATION FROM YOUR CUSTOMERS PRIOR TO ACCEPTING AN ACH ENTRY IN ACCORDANCE WITH THE ECS OPERATING GUIDE (E.G., ORALLY VIA TELEPHONE FOR TEL/IVR, OR IN WRITING FOR PPD)? 3. WILL YOU VERIFY AND AUTHENTICATE THE IDENTITY OF YOUR CUSTOMERS IN ACCORDANCE WITH THE ECS OPERATING GUIDE PRIOR TO INITIATING ACH ENTRIES FOR THOSE CUSTOMERS (E.G., BY OBTAINING A CUSTOMER'S NAME, ADDRESS AND TELEPHONE NUMBER OR USING A DATABASE TO VERIFY THE ACCURACY OF THE INFORMATION PROVIDED BY CUSTOMER)? 4. WILL YOU OFFER ACH-ECHECK TO EXISTING OR NEW CUSTOMERS? I EXISTING I New 5. WILL YOU MAINTAIN AND DISCLOSE TO YOUR CUSTOMERS PROCEDURES FOR CANCELLING AN AUTHORIZATION? YES NO 6. WILL YOU SUBJECT THAT INFORMATION REGARDING EACH TRANSACTION AUTHORIZATION ENTERED BY A CUSTOMER AND/OR YOUR SERVICE REPRESENTATIVE IS ACCURATE AND NOT A DUPLICATE TRANSACTION? YES NO										
FANFARE										
SECONDARY MID - EXISTING MID/DBA:										
FANFARE PACKAGES										
GIFT/LOYALTY PACKAGE (INDICATE CARD ORDER BELOW) SET-UP FEE: \$	MONTHLY FEE (PER MID): \$									
BASIC LOYALTY (NO CARDS) SET-UP FEE: \$	MONTHLY FEE (PER MID): \$									
☐ BASIC GIFT (INDICATE CARD ORDER BELOW) CARD ORDER & RE-ORDERS:	MONTHLY FEE (PER MID): \$									
CARD ORDER	CARD TYPE									
CARD QUANTITY PRICE CUSTOM \$	PROMOTIONAL QUANTITY LOYALTY QUANTITY									
STANDARD\$ (STANDARD CARDS AVAILABLE IN INCREMENTS OF 100. 0	GIFT QUANTITY CUSTOM CARDS AVAILABLE ONLY IN INCREMENTS OF 500)									
ADDITIONAL OPTIONS:	SUSTOM CARDS AVAILABLE ONE FIN INVINCEMENTS OF SUSY									
Max Card Value \$ (Default \$1000)										
	PPLIED TO FEES BILLED FOR FANFARE***									
STANDARD CARD ORDER DETAILS										
CARD STYLE: TEXT COLOR: JUSTIFICATION: ☐ LEFT ☐ CENTER ☐ RIGHT ☐ AS SUBMITTED										
LOGO (TO AVOID DELAY, PLEASE SUBMIT ARTWORK TO: ARTWORK® IMPRINT: ◆FONT (SELECT ONE): Arial Setual Secuple Times New Rom										
◆Text Case (select ONE): ☐ Title Case ☐ UPPER CASE ☐ lower ca	ase As submitted									
	+++++++++++++++++++++++++++++++++++++									
	 									
										
	 									
FANFARE NOTES										
C V4 100-0 0-0 0-0 0-0										
OTHER VALUE ADDED SERVICES	C Conversion Rate: % DCC Rebate: %									
I I DYNAMIC CURRENCY CONVERSION (DCC):	al DCC Registration Fee: \$ DCC Exchange Rate Source: US Bank									
HEALTHCARE: TRANSEND PAY RATE: 1.50%										
SIGNATURE (Signature below is only required when enrolling for the Value Add	ded Services listed on this page.)									
By signing below, Company warrants the truthfulness and accuracy of the information provid	DED, AGREES TO PAY THE FEES SET FORTH HEREIN.									
SIGNATURE NAME & TITLE	DATE									

____Initials 6 USA-MSP-ELV-0319

SALES WORKSHEET

DBA: Burke Motor Group

ACCOUNT DESIGNATION											
■ NEW LOCATION	☐ ADDITIONAL L	OCATION	Existing I	MID:		EXISTING CHAIN #:		LOCATION 1 OF 11			
PORTFOLIO CODE:		FI:		AGENT:	BANK:		MSP Shor	RT NAME: MSIMPACT			
CLIENT GROUP#: 17		ENTITY:	45179		REP#: 4	41816	AWE	3:			
Onsite Inspection: Certify that the below information is true, complete and accurate: Business located in: Separate building Private residence Shopping center/mall Office building Kiosk Other (describe):											
PRINTED NAME: Natas	a Cvijanovic			REP#: 41816			DATE: 12	2/01/2019			
SPECIAL INSTRUCTI	ONS						-				
CREDIT UNDERWRITING	CREDIT UNDERWRITING NOTES:										
ADDRESS NOTES:											

___Initials 7 USA-MSP-ELV-0319

				dditiona							
ır)	Percentage of Ownership	☐ Benefi	cial Owner:	☐ Autho	rized S	Signer	PG Only	Intermedia	ry Business Responsible Party		
lice	First Name:		Middle Na	ame:			Last Name:				
JQ.	DOB:	ID Type:		ID#:		If For	oreign, Country of Issuance:				
ner	If ID Type "Other"					· · · · · · · · · · · · · · · · · · ·					
Part	Other ID Type:		Other	ID#:			If Gov't Issued	d – ID Name:			
ner/	Address/Type: :		•				,	Phone #:			
NO N	City:		State/Province	e:	Zip/Postal Code:						
Principal Information 2 (Owner/Partner/Officer)	Principal address matches the address on the Primary Identification Document above unless otherwise noted.										
natic	Previous Address if current address	is less thar	2 years: A	ddress:							
forr	City: State/Province: Zip/Postal Code:										
Ē	Country(s) of citizenship:										
ipal	Intermediary Business Information										
inc	Intermediary Business Name					Intermed	iary Contact Na	me			
<u> </u>	Intermediary Phone Number					Intermed	iary Email Addre	ess			
r)	Percentage of Ownership	☐ Benefi	cial Owner:	☐ Autho	rized S	Signer	PG Only [Intermedia	ry Business Responsible Party		
ice	First Name:		Middle Na	ame:			Last Name:				
)Off	DOB:	ID Type:		ID#:		If For	eign, Country of Issuance:				
ner	If ID Type "Other"										
art	Other ID Type: Other ID#: If Gov't Issued – ID Name:										
ner/F	Address/Type: :						Phone #:				
Ŏ	City:					State/Province	э:	Zip/Postal Code:			
Principal Information 3 (Owner/Partner/Officer)	Principal address matches the address on the Primary Identification Document above unless otherwise noted.										
matic	Previous Address if current address is less than 2 years: Address:										
for	City: State/Province: Zip/Postal Code:										
드	Country(s) of citizenship:										
ci ps	Intermediary Business Information										
į.	Intermediary Business Name				diary Contact Name						
а.	Intermediary Phone Number						iary Email Addre				
	Percentage of Ownership	□ Benefici	al Owner:	☐ Autho	rized S	Signer	☐ PG Only ☐	_ Intermedia	ry Business Responsible Party		
-	First Name:	ID Turner	Middle Na			14 🗆	Last Name:	laaaaa.			
-	DOB: If ID Type "Other"	ID Type:		ID#:		II FOR	eign, Country of	issuance:			
n 4 er)	Other ID Type:		Other	ID#:			If Gov't Issued	d – ID Name:			
fic	Address/Type: :							Phone #:			
rma er/0	City:						State/Province	э:	Zip/Postal Code:		
Principal Information 4 (Owner/Partner/Officer)	Principal address matches the address otherwise noted.	ess on the F	Primary Ider	ntification Do	cumer	nt above u	nless	□ Seconda	ary ID included if no address match		
ipa er/F	Previous Address if current address	is less than	2 years: A	ddress:							
inc	City:		-		State	e/Province	e: Zip/Postal Code:				
<u> 9</u> 0	Country(s) of citizenship:				•				,		
	Intermediary Business Information										
	Intermediary Business Name					Intermed	iary Contact Na	me			
	Intermediary Phone Number					Intermediary Email Address					

	Percentage of Ownership	☐ Beneficia	al Owner:	☐ Authori	zed Signer	☐ PG Only [Intermediar	y Business	Responsible Party		
	First Name:		Middle N	ame:		Last Name:	Last Name:				
	DOB:	ID Type:		ID#:	If Fo	reign, Country of	f Issuance:				
	If ID Type "Other"										
n 5 cer)	Other ID Type:	Othe	r ID#:		If Gov't Issue	d – ID Name:					
atio Offic	Address/Type: :					Phone #:					
oformation tner/Offic	City:			State/Province	e: Zip/Postal Code:		Code:				
Principal Information Owner/Partner/Office	Principal address matches the add otherwise noted.	ress on the F	rimary Ide	entification Doc	ument above ι	ınless	☐ Secondary ID included if no address match				
ipa er/	Previous Address if current addres	s is less than	2 years: A	Address:							
rinc	City:				State/Province	e :		Zip/Postal Code:			
<u> </u>	Country(s) of citizenship:										
	Intermediary Business Information										
	Intermediary Business Name		Intermed	Intermediary Contact Name							
	Intermediary Phone Number				Intermed	diary Email Addr	ess				