MERCHANT PROCESSING AGREEMENT

Merchant Application and Fee Schedule

8500 Governors Hill Drive Symmes Twp, OH 45249-1384 Phone: 888-208-7231

Fax: 877-822-1248

Please carefully complete the Application and read the Terms and Conditions and other additional forms, as applicable to you, which together make up the Merchant Processing Agreement. The Terms and Conditions can be viewed at https://empower2.fisglobal.com/npccma. Please retain the website to review the Terms and Conditions as well a copy of the Merchant Application for your records. Worldpay ISO, Inc. ("NPC") and Member Bank's acceptance of this Application will be made in a manner authorized in the Agreements and/or Terms and Conditions.

Sales Representative ID	Number (9 digit or	16 digit code)
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1	1		3	7	R		0		2	5		Bank # or Merchant Association #:												
ON	1 M	ER	СНА	NT	BUS	IN	ES	S IN	FO	RMA	TION													
				ust	Matc	h E	Bus	sines	s Ta	ax Ret	urn N	ame)			Contact Name: NICOLE MARTI	N								
												☐ Check here if Corp	oorate Headqu	uarters			S.COM		Website: B3SOLU	TIONSC	WS.C	COM		
Business Location Address: 70161 HWY 59														Business Billing Address: (if different from location address) 3001 MISSIONARY CT										
		S,	LA, 7	042	0										City, State, Zip: MADISONVILL	.E, L	A, 70447							
Phone #: Fax #: (504) 232-8601												Fax #:			Phone #:		•			Fax #:				
Federal Tax ID #: 86-1822220												1			1					I				
SECTION 2 BENEFICIAL/CONTROL OWNERSHIP INFORMATION																								
ers. als	Legal who o	l er wr	ntities or co	can	be a	bus	sec	d to d	lisg	uise in	ivolve	ement in terrorist fina	ancing, money	/ laund	lering, tax evasio	n, co	rruption, fraud, and							
Le	gal Er	ntity	/:											l Institu	ition		•	tion		□ SEC	Regi	istered Entity		
,										Exempt (501C)				on										
Is Merchant a government entity or an entity at least 50% owned or controlled by a government entity? YES NO																								
						•		ne of	ow	ning o	r cont	trolling government												
							Title: Owner						356			Ownership Percentage 100								
										47														
Beneficial Owner/Officer/Principal Name: Lloyd Martin						Title: Owner					SSN #: 434-59-3	356		Ownership Percentage 100										
		ct											City, State, ZIP: Madisonville, LA 704			47				Phone #: (504) 232-8601				
ial C	wner	/O	fficer/f	Princ	cipal	Na	me	e :					Title:	DOB:			SSN #:			Ownership Percentage				
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ION	3 II	ИP	ORT	\NT	DIS	CL	LO	SUR	ES	;		Merchan	t acknowledç	ges rec	ceipt of NPC's d	ocur	nentation, which in	ncludes M	erchant P	rocessi	ng A	greement Ver.GEN.0123		
IMPORTANT MEMBER BANK RESPONSIBILITIES: (1) A Visa Member is the only entity approved to extend acceptance of Visa products directly to a Merchant. (2) A Visa Member must be a principal (signer) to the Merchant Agreement. (3) The Visa Member is responsible for educating Merchants on pertinent Visa Operating Regulations with which Merchants must comply. (4) The Visa Member is responsible for and must provide settlement funds to the Merchant. (5) The Visa Member is responsible for all funds held in reserve that are derived from settlement. IMPORTANT MERCHANT RESPONSIBILITIES: (1) Ensure compliance with cardholder data security and storage requirements. (2) Maintain fraud and chargeback supersede the terms of the Merchant Agreement. (4) Comply with Operating Regulations. The responsibilities listed above do not 45249 (888) 208-7231												Fifth Third Bank, N.A. c/o Worldpay LLC 00 Governors Hill Drive ymmes Township, OH 45249												
rigited i	,	tur	e may	be	evide	enc	ced	by fa	acsi	imile)			Name (please	e print)	Lloyd Ma	rt	in				Da j e(0/22/2024		
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Legal entities can be abused to disguise involve als who own or control a legal entity (i.e., the benefit of Individual/Sole chant a government entity or an entity at least 50% of checked above, list country name of owning or control of Company Ct. and Owner/Officer/Principal Name: lartin address: address:	ON 1 MERCHANT BUSINESS INFORMATION ss Legal Name: (Must Match Business Tax Return Name) JUTIONS LLC ss Name (DBA): JUTIONS LLC JUTIONS LLC Ss Name (DBA): JUTIONS LLC JUTIONS LLC Ss Name (DBA): JUTIONS LLC JUTIONS JUTIONS LLC JUTIONS JUTIONS JUTIONS JUTIONS LLC JUTIONS JUTIONS JUTIONS JUTIONS JUTIONS JUTIONS JUTIO	ON 1 MERCHANT BUSINESS INFORMATION So Legal Name: (Must Match Business Tax Return Name) UTIONS LLC So Name (DBA): Check here if Corporate Headquest Corporate Head	ON 1 MERCHANT BUSINESS INFORMATION IS Legal Name: (Must Match Business Tax Return Name) UTIONS LLC IS Name (DBA): Check here if Corporate Headquarters UTIONS LLC IS Location Address: Check here if Corporate Headquarters UTIONS LLC IS Location Address: Fax #: 232-8601 Fax #: 232-86	ON 1 MERCHANT BUSINESS INFORMATION sis Legal Name: (Must Match Business Tax Return Name) UTIONS LLC so Name (DBA): UTION Extra LED so Name (DBA): UTIO	ON 1 MERCHANT BUSINESS INFORMATION Is Legal Name: (Must Match Business Tax Return Name) LUTIONS LLC Is Name (DBA): LUTIONS LLC Is Location Address: NICOLE MARRIS NICOLE MA	No 1 MERCHANT BUSINESS INFORMATION Is Logal Name; (Must Match Business Tax Return Name) UTIONS LLC Is Name; (Must Match Business Tax Return Name) UTIONS LLC Is Name; (Must Match Business Tax Return Name) UTIONS LLC Is Name; (Must Match Business Tax Return Name) UTIONS LLC Is Name; (Must Match Business Tax Return Name) UTIONS LLC Is Name; (Must Match Business Tax Return Name) UTIONS LLC Is Name; (Must Match Business Tax Return Name) UTIONS LLC Is Name; (Must Match Business Tax Return Name) UTIONS LLC Is Name; (Must Match Business Tax Return Name) UTIONS LLC Is Name; (Must Match Business Tax Return Name) UTIONS LLC Is Name; (Must Match Business Tax Return Name) UTIONS LLC Is Name; (Must Match Business Tax Return Name) UTIONS LLC Is Name; (Must Match Business Tax Return Name) UTIONS LLC Is Name; (Must Match Business Tax Return Name) UTIONS LLC Is Name; (Must Match Business Tax Return Name) UTIONS LLC Is Name; (Must Match Business Tax Return Name) UTIONS LLC Is Name; (Must Match Business Tax Return Name) UTIONS LLC Is Name; (Must Match Business Tax Return Name) It Name; (Must Must Must Must Must Must Must Must	N1 MERCHANT BUSINESS INFORMATION SI Legal Name: (Must Match Business Tax Return Name) UTIONS LLC So legal Name: (Must Match Business Tax Return Name) UTIONS LLC So legal Name: (Must Match Business Tax Return Name) UTIONS LLC Check here if Corporate Headquarters NICOLE MagBSCVIX COM NICOLE MagBSCVIX	No 1 MECHANT BUSINESS INFORMATION So Legal Name: (Must Match Business Tax Return Name) UTIONS LLC Check here if Corporate Headquarters: NICOLE MARTIN NI	No 1 MERCHANT BUSINESS INFORMATION Is Legal Name: (Must Match Business Tax Return Name) UITONS LLC Shame: (Must Match Business Tax Return Name) UITONS LLC Shame: (Must Match Business Tax Return Name) UITONS LLC Shame: (Must Match Business Tax Return Name) UITONS LLC Shame: (Must Match Business Tax Return Name) UITONS LLC Shame: (Must Match Business Tax Return Name) UITONS LLC Shame: (Must Match Business Tax Return Name) UITONS LLC Shame: (Must Match Business Tax Return Name) UITONS LLC Shame: (Must Match Business Tax Return Name) UITONS LLC Shame: (Must Match Business Tax Return Name) MODISON/LLE LA 70447 IN Shame: (Must Match Business Tax Return Name) In Shame: (Must Match Business Tax Retur	NO. 1 MERCHANT BUSINESS INFORMATION Is Legal Name: (Must Match Business Tax Return Name) UITONS LLC MORE MARTIN MORE MARTIN UITONS LLC MORE MARTIN MORE		

SECTION 4 BUSINESS PROFILE AND ASSUMPTIONS																			
☐ Ownership or Le	gal Enti	ty Chan	ige C	lose NP	C Existi	ing MID	#:					Close Date	Existing I	MID:			Оре	en Date:	
Annual Volume (Visa/MC/DS/AX):	\$12	0,000.0	0	% Card	Preser	nt	0			% Card Swipe		0		% Imprint lly Keyed)		0		% B2B	0
Average Ticket (Visa/MC/DS/AX):	\$2	,000.00		% (Card No Preser		100	١		% МОТО	ı	100	Ç	% Internet 0			Ç	% of International Cards	0
Highest Ticket (Visa/MC/DS/AX):	\$5	,000.00			Tota	al	100%	%					•				ı		
☐ Add'l. Location	1st Lo	ocation	MID:						□ Neve	r Accepted	Cards	☑ Proce	ssor Chan	ige - How ma	any proce	ssing stat	teme	ents are you including? <u>C</u>	<u>)</u>
Type of Goods/ Service Sold:																			
MCC:	504	6					R (0	REFUND Check O	POLICY ne):	[∕] ☑ No Re	efund [Refund in days or le		erchandise change only	, 🗆 0	ther			
Seasonal Sales: Yes No Active Months: JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC																			
SECTION 5 COMPLIANCE INFORMATION																			
Do you (MERCHANT) have a 🗵 3rd party software application/gateway or 🗆 POS Terminal Do you store cardholder data? Paper - 🗆 YES 🗵 NO Electronic - 🗀 YES 🗵 NO																			
Have you ever experienced an Account Data Compromise? ☐ YES ☑ NO																			
Third Party Softwar	re/Gatev	vay Ver	ndor Nai	me and	Address	s:					Third F	Party Softwar	e/ Gatewa	ay Vendor C	ontact In	formatio	n:		
Version #		Mer	chant da	ata to wh	nich this	s vendor	has a	iccess:						Does sof	tware st	ore cardh	hold	der information? □ Yt	ES □ NO
PCI DSS. Merchan applicable, and (b) the PCI Program ar	All merchants must comply with the Payment Card Industry Data Security Standard ("PCI DSS"). Merchant is required to maintain the security of card data and to comply with the requirements of the PCI DSS. Merchant must validate its compliance with the PCI DSS and provide NPC with evidence that Merchant (a) has successfully completed a Self Assessment Questionnaire and scan(s), if applicable, and (b) is compliant with the PCI DSS. NPC has created the PCI Program ("PCI Program") to assist merchants in securing card data and complying with PCI DSS. You may be enrolled in the PCI Program and the applicable fees will be assessed in accordance with the terms of the PCI Program. Information on the PCI Program is set forth in Section 15 of the Terms and Conditions and the applicable fees are set forth in Section 8 of this Application. All gateway or other vendor supplied software must be compliant with the Payment Application Data Security Standard rules ("PA DSS").																		
SECTION 6 MER	RCHAN	T BAN	K ACC	OUNT	INFOR	MATIO	N												
																		ERCHANT will receive I entracted. *Subject to sp	
Deposit Time Fram	e: 🗆 l	Premiur	m ACH	☑ Alte	ernate F	unding*	r						Deposit T	ype: 🗹 Co	ombined	□ Ву	Bat	tch	
Any ACCOUNT NU	IMBER i	ndicate	d must	be a val	id acco	unt num	ber for	r handlin	g ACH d	leposits and	d withdra	awals. If n	nore than	one account	t is indica	ated, acc	coun	nt #1 will be used for Sa	ales.
Routing #1:	0	6	5	4	0	0	1	5	3	DDA Ac	count Ty	rpe: ☑ Chec	cking 🗆	Savings					
Account #1:	0	0	6	3	2	3	6	0	6	4									
Routing #2:		•	•	•		•			DDA	Account T	ype: □	Checking	□ Saving:	S					
Account #2:									1									nt is used for: edits □ Chargebacks	

SECTION 7 FEE	SCHEDULE															
APPLICATION	☐ Tiere	☐ Tiered *					DISCOUNT:	☐ Daily	CARE	OPTIONS:	☐ All Car	ds 🗆 Other	Cards			
TYPE:	'E: □ Interchange [#] □						DIOCOCIVI.	☑ Monf		or none.	□ Debit C	Pebit Card Only				
BUSIN	NESS TYPE	□ Retail □ Re	estaurant	☑ Mail/Te	elepho	ne Or	der ** □ Inte	rnet **								
SUB BUSIN	NESS TYPE	□ Retail Key En	tered **	□ DialPay	/ Capt	ure **	□ MOTO/Ca	ardSwipe **	□ Large Ticket							
VISA/MASTERO	CARD/DISC Catego		Rate	Discount F	Rate	Transaction Fee AMERICAN EXPRESS Rate Category*					С	Discount Rate Transaction Fee				
Base				3.84	%	\$	0.00	Base				3.84 %	\$	0.00		
Mid-Qualified 1 (Not Applicable for Reta Merchants)	ail Key Entered, M	//OTO, Internet, DialPay	y +		%	+\$		Mid-Qualit	fied ¹		+	0.00 %	+\$	0.00		
Non-Qualified	2		+	0.00	%	+\$	0.00	Non-Quali	fied ²		+	0.00 %	+ \$	0.00		
Base Debit NON PIN-Based ³ (Same as V/MC/D Discount Rate if left blank) Regulated Only ⁶ □									Miscellaneous P	roduct I	Fees					
☑ Debit PIN-Bas	sed ⁴	Monthly Hosting \$ 0.00		0.00	%	\$	0.00	□ Wireless								
		,		3.84		Sam	e as Visa/MC/	Quantity	Setup Fee	Monthly Hosting Fe	e Tra	ansaction Fee				
Qualified Rewar	rds ⁵						Discover nsaction Fee		\$	\$	+\$					
Transaction fees ar	e charged for	all transaction auti	horization	attempts.				□ Micros ³								
¹ Added to Base di								Quantity	Setup Fee	Monthly Hosting Fe	Tr/	ansaction Fee				
² Added to applical ³ Transaction fee is					Nam (٠ <u>- اند</u> ن	! 4	,	·	, ,						
fee, regardless of ti			se, iviid-Q	Jaillied, or	Non-C	Juaiiii	ed transaction		\$	\$	+ \$	0.00				
⁴ Debit Network Intwill be assessed or	erchange, speal	onsorship, switch a Merchant at the the	and gatewa	ay fees, ar rate deterr	nd any mined	misce in acc	llaneous fees ordance with	□ Internet S	ervices ³							
NPC's standard op	• .							Quantity	Setup Fee	Monthly Hosting Fe	e Tra	ansaction Fee	Г	Batch Fee		
	⁵ Same as Mid-Qualified discount rate if left blank for the applicable Reward categories collected by NPC (Not Applicable for Retail Key Entered, MOTO, Internet, DialPay Merchants).								\$	\$	+ \$		\$			
^TIEDED MEDGIL	ANTO ONLY	Communical Count	4	414 -1-		446				:::::::::::::::::::::::::::::::::::::::	<u> </u>	-f 0 F00/ /0 00)50)			

"TIERED MERCHANTS ONLY - Commercial Card transactions that do not meet the requirements to qualify for preferred rates will be assessed an additional fee of 0.50% (0.0050) on such sales volume. ⁶Regulated applies to all Base NON PIN debit transactions from exempt issuers will fall under the Base V/MC/D discount rate. If a rate is identified but the Regulated Only box is not checked, then this rate applies to all Base NON PIN debit transactions. **If the Retail Key Entered/MOTO/Internet/DialPay Business Type is selected, Rewards cards will be charged discount rates plus 0.11% (0.0011) on all transactions. NPC's processing fees and Card Brand interchange

Entered/MOTO/Internet/DialPay Business Type is selected, Rewards cards will be charged discount rates plus 0.11% (0.0011) on all transactions. NPC's processing fees and Card Brand interchange lees are included in the discount rate. All other Card Brand fees will be assessed or allocated to Merchant at the then current rate determined in accordance with NPC's standard operating procedures

INTERCHANGE MERCHANTS ONLY - CARD ORGANIZATION FEES: Visa, MasterCard and Discover Interchange fees, assessments and other fees will be assessed or allocated to Merchant at the then current rate determined in accordance with NPC's standard operating procedures.

* FLAT RATE MERCHANTS ONLY - CARD ORGANIZATION FEES: All fees are included in discount rate and transaction fee above except fees related to International transactions. Does not apply to American Express.

*AMERICAN EXPRESS - Existing American Express Number 🗆 YES 🗵 NO 🔝 If Yes, Existing American Express Account Number:

Annual Estimated or Actual American Express Volume is less than \$1,000,000.00 ☑ YES ☐ NO

If No, then you are not eligible for the American Express Program unless the MCC is excluded according to current American Express OptBlue Program limitiations. If No and your volume decreases to less than \$1,000,000, you may be converted to the American Express OptBlue Program unless you have opted out.

 $\hfill \square$ By checking this box, you elect to opt out of the American Express Program

☑ By checking this box, you elect to opt out of receiving American Express Marketing Materials

SECTION 8 OCCURRENCE FEES

□Group Annual	\$0.00	Charged in the Month of	ACH DBA Change Fee		/each	Global FFE Auth	\$0.00 /each		
20.0007		October	Retrieval Request	\$5.00	/each	□Advantage Buyer Program	\$0.00 /month		
□Regulatory & Compliance Fee ⁵	\$0.00	Charged Annually in the Month of	□Minimum Bill	\$0.00	/month	TSYS FFE Auth	\$0.00 /each		
□Card Brand Usage Fee (NABU) -	\$0.00	March /each		\$0.00	Charged in the Months of	☑Paper Statement	\$25.00 /month		
MasterCard ³	ψ0.00	700011	□Semi Annual Fee	\$0.00	October and 6	□Welcome Kit	\$0.00 /once		
□Card Brand Usage Fee (NABU) - Visa ³	\$0.00	/each		00.00	months thereafter /once	Monthly Terminal Fee ²	\$2.99 /month		
□Application Fee	\$0.00	/once	□Early Deconversion Fee ¹			<u> </u>			
On File Fee	\$10.00) /month	Chargeback Fee	\$10.00 /each		PCI PROGRAM			
Batch Fee	\$0.00	/per batch	□Address Verification	\$0.00	/each	☑SaferPayments Basic ⁴	\$0.00 /month		
Voice Authorization Fee	\$0.95	/each	□Regulatory and Compliance Fee ⁵	\$0.00	/annual	□SaferPayments Managed ⁴	\$0.00 /month		

Return ACH(s) are subject to a \$25.00 fee for each occurrence.

1099 K Reporting is provided at No Charge

¹The initial term of the Merchant Agreement is 3 years and automatically renews for additional 3 year periods. If this Agreement is terminated prior to the expiration of the initial term or any renewal term, you will be subject to an Early Deconversion Fee ("EDF") in accordance with the terms of Section 7.B of the Terms and Conditions. If limited by state law, these fees may be modified in accordance with Section 7B of the Terms and Conditions.

²Monthly Terminal Fee of \$2.99 will be assessed per month on all next-generation terminals, as applicable.

³The Card Brand Usage Fee (NABU) includes the MasterCard Network Assessment and Brand Usage Fee, the Visa Acquirer Processing Fee, and the Visa Base II Transaction Fee and applies to Tiered Merchants Only.

⁴See Section 15 of the Terms and Conditions for additional information. In addition, Merchant may be charged a PCI Non-Compliance fee of \$74.95 per month per MID if not in compliance with PCI Rules and Regulations. Please refer to Section 6.G of the Terms and Conditions.

⁵See Section 13 of the Terms and Conditions for additional information.

SECTION 9 UNLIMITED PERSONAL G	UARANTY AND CREDIT INFORMAT	FION AUTHORIZATION								
PERSONAL GUARANTEE: In exchange for N "Guarantor") is signing this Merchant Agreeme bound by the Continuing Unlimited Guaranty p Continuing Guaranty provisions. Each Guaran of him or her by utilizing a third-party credit rep by reference as if fully set forth herein and has	ent as a Guarantor of the Merchant ident provisions starting in Section 11 of the Te ntor individually authorizes NPC, Member porting agency and/or to obtain a crimina	tified on page 1 of the Merchant A erms and Conditions, and (ii) ackn er Bank, and/or either of their repre al background check. Guarantor a	greement. By signing below, each Guar lowledges and confirms that, prior to sig esentatives to conduct an initial and ong	rantor (i) accepts and agrees to be ning, he or she received and read those oing comprehensive credit investigation						
Authorized Signature of Guarantor: (Do Not In		Guarantor Name:								
		Lloyd Martin	,	Date of Signature:						
Signed by:				10/22/2024						
Home Address 301 Missionary Ct			City, State, ZIP: Madisonville,LA 70447							
	ocial Security Number: 34-59-3356	Phone #: (504) 234-9495								
SECTION 10 PATRIOT ACT AND BACKGROUND AUTHORIZATION										
To help the government fight the funding of terrorism and money laundering activities, the USA Patriot Act requires all financial institutions to obtain, verify and record information that identifies each person (including business entities) who opens an account. What this means for you: When you open an account, we will ask for your name, physical address, date of birth, taxpayer identification number and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. The undersigned entity(ies) and individuals hereby unconditionally authorize NPC and Member Bank or its agents to (i) investigate the information and references contained herein, and to obtain additional information about the Merchant and such individual(s) by pulling credit bureau and criminal background checks on the Merchant and its principals, including obtaining reports from consumer reporting agencies on individuals signing below as an owner or general partner of Merchant, or providing their Social Security Number on the Application (if such individual asks NPC or Member Bank whether or not a consumer report was requested, NPC and/or Member Bank will tell such individual and, if NPC and/or Member Bank received a report, NPC and/or Member Bank will give the individual the name and address of the agency that furnished it) and (ii) update such information periodically throughout the terms of service of the Merchant Agreement. By providing your SSN and signing this Application, you, in your individual capacity, unconditionally authorize NPC and Member Bank to obtain your consumer credit report.										
SECTION 11 MERCHANT ACKNOWLED	DGEMENTS AND SIGNATURE									
Merchant agrees to and accepts the terms an (collectively, the "Merchant Agreement") and a the Merchant Agreement and that the parties is certifies to NPC and Member Bank that it has information contained in this Application, with actions, inactions, performance or lack of perfiparty selected in connection with the Merchan Merchant acknowledges and agrees that the Nauthorizes the release of Merchant information Program, the applicable Opt Out Box has been	acknowledges receipt of all parts of the N may produce and rely on a copy or electr reviewed all pages of this Application, th out further investigation, for all purposes. formance of any third party provider or ind t Agreement, and it has not relied on any Merchant Agreement shall not be altered in in accordance with the provisions of Se	Merchant Agreement. Merchant actronically stored image of the Merchant all information provided herein. Merchant acknowledges and agridependent sales representative. Nerchantses, representations, warrid by any prior, contemporaneous of	cknowledges that no handwritten change chant Agreement for all legal purposes. is true, correct and complete and that N rees that NPC and Member Bank are in Merchant represents that it has chosen for anties, or covenants of the independent or subsequent oral representations made	es have been made to the printed text of Merchant represents, warrants and NPC and Member Bank may rely on the no way responsible or liable for the for itself any services, equipment or third sales representative, NPC or others. e by any party. Merchant further						
IN WITNESS WHEREOF Merchant has cause Agreement shall be binding upon Merchant up				ne Terms and Conditions. The						
MERCHANT										
Signature (Signature may be evidenced by fact X	csimile)	Name (please print) Lloyd	Martin	^{Date} /22/2024						

SECTION 12 EQUIPMENT SETU		PROVID	ED	PROVIDER CODE: NP		PROVIDER	iii 30F = 1			WILK = IV	PROVIDER
TERMINAL	QTY	CODE		PRINTER		CODE		PII	N PAD		CODE
POS Software or Gatewa	y 1	MER	2						□NEW □E	XCHANG	E
										XCHANG	E
0.0		1					la.				
Other:	Provider Co	de: O	ther:		Pr	ovider Code:	Other:			Provi	der Code:
	SOFTWARE NAME TSYS (ISSUING PF		i)	PUBLISI TSYS (IS		ROCESSING)		VERSIC (ALL)	DN		
EQUIPMENT OPTIONS		THE DE	EFAULT SELECTION	ON WILL B	E APPLIE	ED FOR ANY OP	ON NO	T SELECTED	BELOW		
□RETAIL/MOTO					□RES1	TAURANT	ïps □Y		□CASH A	DVANCE	<u> </u>
AVS □ YES □ N	0	Auto-Clo		NO		Serv		ES □ NO ES □ NO		NG	
Last 4-Digits ☐ YES ☐ N		Store N Fo	TIME			Tables 🗆 `			FUEL	YES □N	10
CVV 2 ☐ YES ☐ N Purchase ☐ VEO ☐ N			e-Dial YES			Bar 1	Γab □ Υ	ES □ NO	PASSWO	RD	
Card/Level 2 YES N		Cash	Back ☐ YES ☑			Suggested	Tip □ Y	ES 🗆 NO		AII	VEO E NO
Invoice # Prompt ☐ YES ☐ N PBX Code ☐ 8 ☐ 9	O	Debit Cash Max Ar				PAY (FPS)					YES □ NO YES □ NO
Multi-Merchant □ YES □ N	0	IVIAX AI	nount –			□Both receipts si	•			_	YES 🗆 NO
First Merchant	++ Auto		e for Alternate Fun			∃Both receipts N ⊒NO receipts und			Settler	_	YES □ NO
MID ————————————————————————————————————		to be no lat	er than 7:30 p.m. C	201	Wireles	s ID:	•			ther	
Custom neader / Footer.											
					Comme	ents:					
EQUIPMENT SHIPPING INSTRUCT	TIONS		red <u>ONLY</u> if orde lected below	red throug	h NPC -	Default shippi	ng optior	ns (indicated	l by [*]) will be	applied t	for any option
Ship To:	☑ Do Not	Ship □ Mer	chant Location * [□ ISO Locat	ion □ Oth	ner		1-3 Day Prio	ever Night rity *	□ Ground	d □ Saturday
Attn:							Pa	ayment For Ed	quipment Will Be	:	
Aur.								Lease □	Check □ Cash	n □V	/isa □ MC
Address:								Discover	Amex □ 30 d	ay (Bill Gr	oup)
City:	State:	Zip:	Phone #:			☐ Special Instruc	ctions:				
NPC TO REPROGRAM/TRAIN MER	RCHANT? □YES	☑NO									
NPC TO SHIP WELCOME KIT?	□YES ☑NO										
WELCOME KIT SHIPPING INSTRU	CTIONS					Required	l if welcor	ne kit is ship	ping to separat	e address	from above
Ship To: □Merchant Location *	□ISO Location □	□Other				Attn:			Phone	#:	
Address:						City:			State:		Zip:
SECTION 13 SITE INSPECTION IN	IFORMATION										
I represent and warrant that the infe	ormation set forth	in the applic	ation is true and ac	curate to the	e best of r	ny knowledge. In	addition, I	hereby certify	that (check whic	h applies):	:
☑ I have physically inspected the				Busine	ss / Inve	ntory / Shipmen	its:				
address, personally confirmed the Owner/Officer Information Section				Does b	usiness a	ppear as represe	ented?		☑YE	S	□NO
□An NPC approved third party sit				Is busin	ness oper	and operating?			☑YE		□NO
15 days of my signature below or				Is inven	•	cient for business			☑YE		□NO
needed.			**	0		ervices delivered ces charged to c			□YE. ☑Ord		☑NO □Shipment
☐ I have not physically inspected verified the validity of the business identity of the person listed under	Are goo	od and se	rvices delivered ped, is a Fulfillm		□Digi		/sically	□Both ☑NO			
If Fulfillment House is used, ple	ase complete the	following:	:	90008							
Fulfillment House Name and Addres	s:						F	ulfillment Hous	e Contact Informa	tion:	
Is Fulfillment House PCI DSS Comp	liant? □YES ☑NO		% o	f shipments t	oy this ver	ndor					
Location Type: □Retail Store From	nt ☑Office Buildi	ng □Resi	dence □Industria	al Building	□Trade	Show					
Sales Organization: IMPACT PAYSYS	STEM LLC	Sales F		ia				Application Date: 10/22	2/2024 10	/22/20)24