

GME Supply 1391 E. Boone Industrial Blvd. Columbia, MO 65202

EQUIPMENT FINANCING FOR ANTENNA ALIGNMENT TOOLS

EQUIPMENT FINANCING FEATURES 3 EASY STEPS

1. Pay advance finance payment

- a. Pay 20% of the equipment cost as a down-payment. This is the first month's finance payment.
- b. Example: \$5,000 equipment cost = \$1,000 (down-payment)

2. Calculate the monthly payment

- a. Subtract the down-payment from the equipment cost. Then divide this by the 11 remaining months. (No interest added to the 11 months)
- b. Example: \$5,000 equipment cost \$1,000 (down-payment) = \$4,000 divided by 11 months = \$363.64 per month for the remaining 11 months

3. Buy out for \$1.00

a. You will own the equipment at the end of the finance term for \$1.

Payment Type

20% down-payment, then 11 fixed monthly payments.

Term

1 year

Interest Rate

Interest does not accrue on a lease. Monthly payment is for the use of the equipment and determined based in part on the original cost of the equipment, the purchase options selected, and the customer's credit history.

Application processing fee

\$75

Late Payment Fees

The greater of 1) 15% of the late payment amount or 2) \$29 for each late payment (or if less, the highest amount permitted by applicable law) Monthly payment Amount Payments are fixed. Customer must make the monthly payment plus any other miscellaneous items that might be due. \$50 for returned check or ACH.

Personal Guarantee

Is required. Applicant must have a credit score of 660 or higher.

Prepayment Policy and Fees

The lease is non-cancelable and may not be terminated early.

EQUIPMENT LEASE CREDIT APPLICATION

Арр #
Sales Rep

The business equipment you are	acquiring can be leased (subject to acc	eptance by Marli	in Leasing) u	inder the follow	ing terms:
TOTAL EQUIPMENT COST: \$		Term:	mos.	Ro	ate Factor Used: _	
Monthly Payment (plus applicable taxes): \$	F	Purchase Option	n:			
Advance Rentals: \$	Security Deposit: \$		Other:			
EQUIPMENT BEING LEASED (Include	quantity, make, model, seria	l number and a	ccessories.)		IECK HERE IF E(QUIPMENT IS USED.
Equipment Location (If different than below.):			City		State	Zip
LESSEE INFORMATION	МАУ И	VE CONTACT L	ESSEE IF ADDITIC	ONAL INFOR	MATION IS NEEL	DED? 🗆 <mark>YES</mark> 🛄 NO
(Full Legal Business Name:					Contact Person	
Address:		City	Coun	ty	State	Zip
E-Mail:		Internet Addre	ess:			
Phone: Fax:		Federal Tax ID	<mark>) #:</mark>		Years in B	usiness:
Nature of Business:					Years of Ow	mership:
State of Incorporation/Organization:	Business Type:	Corp.	Limited Liabilit	y Corp.	Partnership	Proprietorship
OWNERS, PARTNERS OR GUARAN	TORS					
1) Name:		Title:		S	S#:	
Home Address:	Home Phone:					
2) Name:		Title:		S	S#:	
Home Address:			Н	ome Phone: _		
BANK INFORMATION						
Name of Bank:		Bank Offic	er:			
Phone:	_ Deposit/Check Acct. #:		l	.oan Acct. #:		
Name of Bank:		Bank Offic	er:			
Phone:	_ Deposit/Check Acct. #:		l	.oan Acct. #:		
TRADE REFERENCE						
Name of Supplier:	Contact:					
Address:			PI	none:		
TRADE REFERENCE						
	Contact: Phone:					
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The person(s) supplying the above information certifies to GME Supply that it is true and correct. The Owners/Partners/Guarantors recognize that their individual credit histories may be a factor in the evaluation of the lease applicant and, thus, authorize GME Supply or its designee to investigate their personal credit status. This includes obtaining and using their consumer credit reports from time to time in the credit evaluation and collection processes.

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