

Merchant Processing Application and Agreement

Please review the information below and sign if everything looks right. If you have any questions please contact your representative.

Setup Information	
Sales Code	Application Platform
ONGLF19	North
Business Details	
Contact Information	
First Name	Last Name
Bela	Nagy
Email	Phone Number
bnagy@ircgov.com	(772) 770-5000
NOTE: Failure to provide accurate information may result Section A.4 of your Program Guide for further information Business Legal Name Indian River County	It in a withholding of merchant funding per IRS regulations. (See Part IV, n.)
DBA Name	Tax Filing Name
Sandridge Golf Club	Indian River County
Tax Filing Method	Tax ID (EIN)
X EIN SSN	
Type of Ownership	
X Government Indiv	idual / Sole Proprietor Limited Liability Company
Non-Profit Org	nership Private Corporation
Public Corporation Tax I	Exempt
Stock Exchange (Only applicable for Public Corporate	tions) Stock Ticker Symbol (NYSE or NASDAQ)
NYSE or NASDAQ X Other/Not Appli	cable
Industry (MCC)	Business Description
9399 - Government Services (Not Elsewhere Classified	d) Municipally owned Golf Driving Range
Industry Options	Business Start Date
Quasi Cash	
Website	Business Phone
	(772) 770-5003

Business Address Street Address 1 Street Address 2 City State ZIP Country United States of America **Business Legal Mailing Address Street Address 1** Street Address 2 City State ZIP Country United States of America **Owner Information Business Owner Information** Please provide the following information for each individual who owns, directly or indirectly, 25% or more of the equity interest of your business. **First Name Last Name** Bela Nagy Title CEO COO LLC Member Owner **CFO** Vice President Partner President Secretary Treasurer **Ownership Percentage Personal Guarantee** % Yes SSN **Date of Birth Mobile Phone Email** bnagy@ircgov.com **Residence Address Street Address 1** Street Address 2

City	State
ZIP	Country
	United States of America
Additional Business Owner (1)	
First Name	Last Name
Ownership Percentage	SSN
%	
Date of Birth	Mobile Phone
Residence Address	
Street Address 1	
Street Address 2	
City	State
ZIP	Country
Additional Business Owner (2)	
First Name	Last Name
Ownership Percentage	SSN
%	
Date of Birth	Mobile Phone
Residence Address	
Street Address 1	
Street Address 2	
City	State
ZIP	Country

Additional Business Owner (3)	
First Name	Last Name
Ownership Percentage	SSN
%	
Date of Birth	Mobile Phone
Residence Address	
Street Address 1	
Street Address 2	
City	State
Country	
Additional Business Owner (4)	
First Name	Last Name
Ownership Percentage	SSN
%	
Date of Birth	Mobile Phone
Residence Address	
Street Address 1	
Street Address 2	
City	State
ZIP	Country
Panking and Processing	
Banking and Processing	
Deposit and Withdrawal Bank Account	
Bank Name	Account Type
	Business Checking Savings
Routing Number	Account Number

Average Monthly Card Vo	lume	Average Transaction	on Amount		
\$25000	/ month	\$12			
Product / Service Del	ivery Windows				
On average, Products / Se	ervices are delivered in	Mode of Transaction	on		
X 0-7 Days	8–14 Days	In Person		100	%
15–30 Days	30+ Days	Telephone			%
		Online			%
				Must total 100	0%
Equipment					
New Orders					
PRODUCT NAME		NETWORK	QTY	PRICE *	FREQUENCY
CardPointe Gateway (Rapid	dConnect North)	Cardnet	1	-	-
				\$	
Menu build requested	d				
				\$	
Menu build requested	d				
				\$	
Menu build requested	t d				
				\$	
Menu build requested	t				
	* Price does not include	tax and shipping & han	dling.		
Ship Equipment To					
Ship To Attention		Ship To Email			
Street Address 1					
Street Address 2					
City		State			
ZIP		Country			

Merchant Services Payments Accepted American Express Opt Blue Discover Full ACQ Mastercard Visa **Discover Discover Program Discover EASI SE** Discover Full ACQ Discover EASI **Discover Industry Options Enable Incremental Authorizations** Debt Repayment Program **American Express Amex Program Amex ESA SE** Amex OptBlue Amex ESA IATA/ARC Number **EBT** FNS# **Pricing Information Pricing Discount Frequency** Monthly Daily **Funding Rollup** Separate Fees and Deposits Individual Batches Net Fees and Deposits Interchange Plus Pass Through Interchange — Includes Dues and Assessments. You will be charged the applicable interchange rate from MasterCard, Visa or Discover, plus a MasterCard Assessment Fee of 0.13%, a Visa Assessment Fee of 0.1%, or a Discover Assessment Fee of 0.13%, plus any other fees indicated on this Service Fee Schedule. (MC Assessment Fee when transaction is equal to \$1,000 or more will be assessed an additional 0.01% per transaction.) American Express Assessment Fee of 0.15% **Passthrough Interchange Costs** Gross Interchange Net Interchange **DISCOUNT FEES CREDIT / NON-PIN DEBIT** Visa Qualified % 0.2 MasterCard Qualified 0.2 % **Discover Qualified** 0.2 % Amex Qualified 0.3 %

Flat Rate **DISCOUNT FEES CREDIT / NON-PIN DEBIT** Visa Qualified % Mastercard Qualified % **Discover Qualified** % Amex Qualified % **Tiered DISCOUNT FEES CREDIT NON-PIN DEBIT** Visa Qualified % % Visa Mid-Qualified % % Visa Non-Qualified % % Mastercard Qualified % % Mastercard Mid-Qualified % % Mastercard Non-Qualified % % **Discover Qualified** % % Discover Mid-Qualified % % Discover Non-Qualified % % Amex Qualified % Amex Mid-Qualified % Amex Non-Qualified % **Bill Back** Non-Qualified Surcharge Fee (excluding interchange passthrough fees, see Section 18.1) Applies to Non-qualified MC, Visa, Discover, American Express Credit and/or Non-PIN Debit Transactions. %

	J		
DISCOUNT FEES	CREDIT	NON-PIN DI	EBIT
Visa Qualified		%	%
Mastercard Qualified		%	%
Discover Qualified		%	%
Amex Qualified		%	

Dues & Assessments

(See Agreement for definitions, warranty requirements, and any additional fees.) All other card association fees are passed thru at cost - NABU, APF, connectivity, & usage.

Dues & Assessments

X Yes	No
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Authorization & Transaction Fees

Authorization & Transaction Fees		
FEE	AMOUNT	
Authorization Fees (All Card Types)	\$0.10	/ Each
ACH Batch Fee	\$0.05	/ Each
Voice Authorization Fee	\$0.00	/ Each
Address Verification Fee (AVS)	\$0.05	/ Each
Transaction Fees (All Card Types)	\$0.00	/ Each
PIN Debit		
FEE	AMOUNT	
Discount Fee		%
Transaction Fee	\$	/ Each
EBT		
FEE	AMOUNT	
Transaction Fee	\$	/ Each
Voyager		
FEE	AMOUNT	
Authorization Fee	\$	/ Each
Sales Discount		%
Wright Express		
FEE	AMOUNT	
Discount Fee		%
Transaction Fee	\$	/ Each
Chargeback Fee	\$	/ Each
Retrieval Fee	\$	/ Each

CardPointe and Gateway Fees

Jaran Jinto and Jatoway 1 000		
FEE	AMOUNT	
Setup Fee	\$0.00	(One Time)
CardPointe Monthly Platform Fee	\$20.00	/ Monthly
Gateway Transaction Fee	\$0.00	/ Each
Gateway Monthly Fee	\$0.00	/ Monthly
Clover Security		
FEE	AMOUNT	
Clover Security Fee	\$	/ Monthly
TransArmor		
FEE	AMOUNT	
TransArmor Token and Encrypt Fee	\$0.00	/ Monthly
Clover Fees		
FEE	AMOUNT	
Clover Go Service Fee, Per MID	\$0.00	/ Monthly
Monthly and Miscellaneous Fees		
FEE	AMOUNT	
Application Fee	\$0.00	(One Time)
Minimum Processing Fee	\$0.00	/ Monthly
DDA Rejects	\$0.00	/ Each
Statement Fee	\$0.00	/ Monthly
Data Breach Fee	\$0.00	/ Monthly
Chargeback Fee	\$10.00	/ Each
Retrieval Fee	\$5.00	/ Each
Annual Membership Fee	\$0.00	/ Annual
Regulatory Product Fee	\$0.00	/ Monthly
PCI Non-Compliance Fee	\$29.95	/ Monthly
Wireless Fee	\$0.00	/ Monthly
Wireless Activation Fee	\$0.00	(One Time)
PCI Annual Fee	\$0.00	/ Annual

Early Termination Fee

The initial term of this Agreement is three years from the date of your approval by our Credit Department (the Initial Term). If you terminate this Agreement before the end of the then current term or otherwise stop processing your transactions with us, you will be

charged this Early Termination Fee. After the Initial Term, subject to Part IV, Section A.3, this Agreement shall automatically extend for an additional period of one year each (each an Extended Term).

FEE

AMOUNT

Client Initials

Personal Guarantee

By signing below, signer(s) unconditionally guarantee(s) to the Processor and its successors and assigns the full and prompt payment when due of all its obligations of every kind and nature of Merchant arising directly or indirectly out of the Agreement and /or the TeleCheck / TRS Services Agreement or any document or agreement executed and delivered by Merchant in accordance with the terms of the Agreement. The undersigned further agrees to pay to the Processor all expenses including attorney fees and court costs) paid or incurred by the Processor in collecting such obligations and in enforcing this Guaranty.

paid or incurred by the Processor in collecting such obligations	s and in enforcing this Guaranty.
Signature	Date
Confirmation	
Agreement Approval	
and certifies that all information provided in the application is t Affiliates and our third party subcontractors and/or agents may telephone number(s) Client has provided in this Merchant Pro message in the event that Client is unable to be reached, ever previously registered on a Do Not Call list or requested not to to receiving commercial electronic mail messages from us, ou time. Each signer authorizes CardConnect LLC and/or the Me inquiries CardConnect LLC and/or the Member Bank deem ap	to the terms and conditions stated in the front and back of this agreement true, correct and complete. Client acknowledges and agrees that we, our y use automatic telephone dialing systems to contact Client at the ocessing Application and Agreement and/or may leave a detailed voice in if the number provided is a cellular or wireless number or if Client has be contacted by Client for solicitation purposes. Client hereby consents or Affiliates and our third party subcontractors and/or agents from time to ember Bank or any agent of the Member Bank, to make whatever oppropriate to investigate, verify, or research references, statements or application. Merchant understands this agreement shall not take effect for the Member Bank and a merchant number is issued.
example, those prohibited by the Unlawful Internet Gambling I	merchant account and/or the Services for illegal transactions, for Enforcement Act, 31 U.S.C. Section 5361 et seq, as may be amended ns in certain jurisdictions pursuant to 31 CFR Part 500 et seq. and other).
Client certifies, under penalties of perjury, that the federa provided herein are correct.	I taxpayer identification number and corresponding filing name
Sign Your Agreement	
Signature	Date
CardConnect LLC Application Approved By: Signature	
Signature	
Title	Date
Wells Fargo Bank N.A. (a member of Visa USA, Inc. and M Application Approved By:	lasterCard International, Inc.)
Signature	
Processor Information	
Name	CardConnect LLC
Address	1000 Continental Drive, Suite 300, King of Prussia PA, 19406
URL	www.cardconnect.com

Customer Service (Phone)

1-877-828-0720