	D	LL FINANCI	E LLC	C ("Les	sor")										
		LEASE#				Α	Application #	LEASE DATE:							
	ш	NAME									IPMENT LOCATION (if different from Lessee's			MAKE PAYMENTS TO:	
	LESSEE	ADDRESS			address	address)				DLL Finance LLC P.O. Box 77122					
	Ĕ	CITY & STA	TE												MN 55480-7702
		ZIP CODE		=144		2500		1				1			
H	SIID	DI IED INEOD	MATIC		L ADDF		no::	TELE	EPHONE	NO.		Telephone Num	hor:		
SUPPLIER INFORMATION: Supplier Name:: Supplier Address:								r elephone Num	ber.						
F	DESCRIPTION OF LEASED EQUIPMENT														
	Pursuant to the terms of this contract (this "Lease"), the undersigned Lessee (if more than one, jointly and severally), hereby agrees to lease the property described below (the														
	"Equipment") from the Lessor on the terms and conditions hereof. Make and Model of Equipment Serial Number (s) Minimum Insurance Required Hours at Delivery During Lease Term														
-														Lease Term	
Ш	If box is checked, see the attached Exhibit titled "Equipment/Trade-In Addendum" incorporated herein by reference for a full description of the Equipment. LEASE TERM AND PAYMENT SCHEDULE														
L	Thio	Loggo shall be	oomo	offootiv	o unon	ovocut	tion by Logger	LEASE TERM AN and shall be for the Term					monto at the tir	man and in the ame	unto ao followa:
		curity Deposi						see's acceptance of the			CIII. LCSS	ee siiali iiiake Fay	ments at the th	nes and in the and	unts as follows.
П	LEA	SE TÉRM: Th	is Lea	ase sha	II comr	nence	on: 🗌	OR the 1st day of th	e month	imme	ediately fo	llowing Lessee's s		e Initial Term ("Te	
_	on th							ot thereof (the "Comme	ncement"	').		IDDE		onths from the Com	mencement.
H.					_			L PAYMENTS:					GULAR PA	AYMENIS:	
Ľ	Mon	thly - 🗌		arterly ·		Sem	niannual - 🗌	Annual -		Se	asonal P	ayments are du	e on:		
-		Number	of Pa	yments	<u> </u>		Amour	nt of Each Payment							
-								\$							
-		First Payr													
		All other Pa													
								curs more than 60 days a nore or less than the Supp						turn, Lessee authoriz	es Lessor to adjust
۲	HEF	ayments by not	more	IIIaii 1370	ii uie c	OSL OF ILI	ie Equipment is i		HASE C			SSOI S COST OF IUTIUS	criariges.		
h	f no	Default exists	undei	r this Le	ase or	under	any other agre	ement between Lessee				s affiliates or relate	ed parties, Les	see will have the o	ption (if checked by
								purchase all (but not le					-		
								chase the Equipment) ned by Lessor in its s			d Price of d Price of	·	unt is indicate	d the price shall h	e as determined by
		etion)				01 14.0	(as asts	2, 20000	_			discretion)	ant is indicate	u, the phoe shall b	c as actermined by
Ц	Plus a	any applicable tax	es. The	e Amount	Finance	ed is \$, Interest / Fina	ance Charge is \$ (ass	suming all F	Paym	ents are ma	ade on their due date)	and Total Amoun	t of Payments is \$	
١.								TERMS A							
								set forth above. Sales a ice; however, if a purchas							
1	orope	erty taxes. If app						by law in the amount of \$							
		087076-5.	, -												
							grees to pay a fe Lessor in connec	e or \$. Lessee unde ction with this Lease, inclu					itee. Lessee sna	all also pay a UCC fe	e of \$. Lessee
1	Late	Payments and	Disho	onored F	Paymen	ı ts . Eád	ch Payment past	due more than 10 days s	shall be su	ubject	to a late c	harge accrued at ar			
								er form of payment made r, be paid on demand or							
								ount permitted under appl			or dymoni	o payable ficiculae	and Lessee pr	ornises to pay the re	salang morease in the
								ted above and in the event							
		amount of up to syment refund.	5 \$100). Lessee	unders	tands L	essor may make	a profit on this fee. Lesso	or may on	set si	ıcn amoun	t from any amounts	owed to Lessee	including, without lin	nitation, any applicable
i	Net L	éase. THIS LE						BLIGATION TO PAY IN F							
								UTE, CLAIM, COUNTER IENT OR ANY OTHER							
								SERT AGAINST LESSO							
								see acknowledges receip							
								oment or revoke acceptan sceptance Certificate supp							
<u> </u>	EXP	RESS OR IMPL	IED W	<u>ITH RES</u>	SPECT :	TO AN	Y EQUIPMENT,	INCLUDING WITHOUT L	LIMITÁTIC	ON, A	NY IMPLIE	ED WARRANTY OF	MERCHANTA	BILITY OR FITNESS	S FOR A
								ufacturer nor the supplier by Supplier are not bindin			Lease ("S	upplier") is an agent	of Lessor's and	any representations	or warranties or
								se, standard all-risk type p			e insuranc	e for the full replace	ment value of the	e Equipment, and in i	no event less than the
								deductible equal to the g							
								re been made. There is n curs (each a "Default"): a)							
) Lessee or any partner of							
	business as a going concern; Lessee transfers all or substantially all of its assets; Lessee makes an assignment for the benefit of creditors, or d) Lessee or any guarantor or partner voluntarily file or have filed against it or if involuntarily, a petition for liquidation, reorganization, adjustment of debt or similar relief under the Federal Bankruptcy Code or any other present or future federal or state														
								pointed for Lessee or a su					upicy code or a	iny other present of	iuluie ieueiai oi slale
								d agrees that in addition							
	www.seemyterms.com: 676S42P ("Additional Terms and Conditions"): (i) were read and understood by Lessee prior to signing below; (ii) are incorporated herein by reference as if fully set forth herein; and (iii) any capitalized terms not defined herein shall have the meaning given them in the Additional Terms and Conditions. The Additional Terms and Conditions address the following items, among														
	others: insurance, taxes, default conditions, default remedies, maintenance, risk of loss, purchase options and automatic renewal, governing law and assignment of the Lease.														
l	BY S	SIGNING BELO	W, LE	SSEE A	GREES	S TO TI	HE TERMS AN	CONDITIONS SET FO	orth on	THIS					6. This Lease may be
F	exect	uted and accept Lessee's Nar		iny numb	er of co	unterpa	arts, including face	simile or electronic mail co	unterparts I	S	Accento	d by DLL Finance	II C in Johns	ton lowa	
	Щ	ressee 2 Mgl	ne.							퐀	vecehie	a by DEL Pillance	, LLO III JUIIIIS	.оп, ю ч а	
	ESSEE	Signature								SSOR	Signatui	re			
	Ű	Print Name					Title			ä	Print Na		1	Title	
1	- 1	, mit reallie					1100			_			1	. 140	

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Equipment/Trade-In Addendum

New/Used	Purchased Equipment Description (Include make and model)	Serial Number	Describe Property Purchased	Price \$
-				

Trade-In Equipment Description (Include make and model)	Serial Number	Trade-In Allowance \$	Less Owing \$	Net Trade-In \$

Lessee, by signing below, represents and warrants:

- 1.It has reviewed and acknowledges and agrees that the information in the table(s) above is accurate and complete;
- 2. Except as described above, any trade-in property is free and clear of all security agreements, liens and encumbrances;
- 3. If any trade-in property is listed above, Lessee hereby trades-in and transfers all of its right, title and interest in and to the trade-in equipment described above.

A facsimile or electronic signature of this addendum may be treated as an original.

Lessee	Lessor
(Signature)	(Signature)

Maintenance Agreement (Golf Cars)

Lease Case ID:	Lessor:	DLL Finance LLC
Lessee:		
Date:		

This Maintenance Agreement (the "Agreement") relates to all Equipment, as defined in the Lease agreement between Lessee and DLL Finance LLC as further identified above (the "Lease Agreement") and each Lease entered into pursuant to the Lease Agreement. All capitalized terms shall have the meanings ascribed to them in the Lease Agreement. Lessee agrees as follows with respect to each item of Equipment which is required to be returned:

- 1. **RETURN OF EQUIPMENT.** Notwithstanding anything to the contrary contained in the Lease Agreement and/or the Lease and in addition to the terms and conditions contained therein and herein, Lessee shall, at Lessee's sole cost and expense, return all, but not less than all, of the Equipment described in each Lease to Lessor, or its designee immediately upon the expiration of the Term of the Lease pursuant to the terms and conditions contained in the Lease and with respect to each item of Equipment, as applicable, the following must be true:
 - (A) All safety equipment must be in place and meet applicable federal, state and other governmental standards.
 - (B) All windscreens, covers and guards must be in place with no sheet metal, plastic, or cowling damage.
 - All parts, pieces, components and optional equipment must be present, installed and operational. All accessories that accompanied the units and/or were subject to the Lease, including without limitation battery chargers, GPS equipment, diagnostic and tuning equipment shall be returned in proper order. Upon request of Lessor, all maintenance records and manuals related to the Equipment shall be provided by Lessee to Lessor.
 - (D) All motors shall operate smoothly without overheating and shall have good bearings and bushings.
 - (E) All electronic controls shall operate per manufacturer's specifications. Controls which bypass normal operations shall be repaired at Lessee's expense.
 - (F) All electrical systems shall be able to provide electrical output as specified by the manufacturer.
 - (G) All batteries shall be in good, safe operating condition with no dead cells or cracked cases. Batteries should hold a charge and provide adequate power to operate the equipment.
 - (H) All Equipment shall have serviceable brakes and tires (retaining proper air pressure, and without repair patches) and the wheels shall not be dented and/or bent.
 - (I) All oil and grease seals must contain lubrication in the manufacturers designed reservoir.
 - (J) All Equipment must have a relatively clean appearance.
 - (K) All Equipment shall be free from excessive wear necessitating major component repair or replacement caused by lack of recommended maintenance as detailed in customer operating/maintenance manual furnished with each item of equipment.
 - (L) All Equipment shall be free from structural damages and/or bent frames.
 - (M) All Equipment attachments, if any, must be in good condition.
- 2. RETURN PERFORMANCE. Each item of Equipment must be able to complete the following tests:
 - (A) Operate normally in forward and reverse directions through all the speed ranges or gears.
 - (B) Steer normally both right and left in both forward and reverse.
 - (C) Have all functions and controls work in normal manner.
 - (D) Be able to stop with its service brakes in a safe distance in both forward and reverse.
 - (E) Operates without leaking any fluids.
 - (F) Perform its designed functions in a satisfactory manner.

Notwithstanding the above, if the total cost of the repairs for all items of Equipment subject to a Lease is less than \$100, Lessor will not bill Lessee.

- 3. **REPAIRS / REQUIRED PURCHASE.** If, in the Lessor's sole judgment, any item of Equipment is damaged or does not meet the standards set forth above, or if Lessee fails to discharge its obligations set forth above with regard to any item of Equipment, Lessee shall pay to Lessor, immediately upon demand, at Lessor's election, (a) the amount which Lessor determines will be necessary to return the Equipment to its required condition and/or to replace missing, damaged or non-performing items or equipment, or (b) Payments due and to become due under the terms of the Lease, Taxes, fees and charges due and to become due under the terms of the Lease, plus the residual value as indicated in Lessor's books and records associated with such item of Equipment.
- 4. **MISCELLANEOUS**. Lessee agrees that a copy of this Agreement bearing a signature of Lessee which was transmitted by facsimile or printed from an electronic file shall be admissible in any legal proceeding as evidence of its contents and its execution by the parties in the same manner as an original document.

	Lessee's Name:			ESSOR	Accepted by DLL Finance LLC in Johnston, Iowa		
LESSEE					$ \xi $		
	Signature				Signature		
	Print Name	Title			Print Name	Title	

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DLL FINANCE LLC

DELIVERY AND ACCEPTANCE CERTIFICATE

TO: DLL FINANCE LLC									
RE: CONT	RACT NO.	WITH CASE ID (TH	HE "CONTRACT")						
The undersigned ("Customer") hereby certifies that Customer has financed all items described below ("Equipment") pursuant to the Contract and further certifies that:									
 (i) the Equipment has been delivered to and has been received by Customer; (ii) all installation or other work necessary prior to the use thereof has been com (iii) all Equipment has been examined by Customer, is in good operating order a condition, and is in all respects satisfactory to Customer; (iv) the Equipment is accepted by Customer for all purposes under the Contract; (v) a facsimile or electronic signature of this Delivery and Acceptance Certificate be treated as an original 									
Quantity New or Used		Make and Model Number(s)	Serial Number(s)						
Date:		(Legal Name of Custor By: (Customer Signa							
		(Printed Name a	nd Title)						

Please return signed copy via email at: funding@mycontractadm.com or fax to: 866-518-9270





AUTHORIZATION FOR AUTOMATIC PAYMENTS (ACH DEBIT) AND PAPERLESS INVOICING

Please follow the simple instructions in this form to set up Automatic Payment, Paperless Invoicing, or both. Ensure you complete both the "Automatic Withdrawal" and "Paperless Invoicing" sections to take advantage of both time-saving features. Please call Customer Service at (800) 355-5024 if you have any questions.

You can fill out and submit this form online and avoid the need for a voided check by visiting http://bit.ly/dllach2

Contract Number (If Known): Customer Name:	
Customer Address:	
Customer Phone Number:	
Automatic Payments	
Bank Account Holder(s):	Sample check:
Bank Name:	Your information
Bank Address/ Branch	Pay to the order ofDollars
Location:	987456123 00012345678 1234 ABA Routing No. Bank Acct. No. Check No.
ABA Routing Number:	
Account Number:	This is a ☐ checking account* ☐ savings account**
*If a Checking account is identified above, please send a copy of a v	oided check. Couting number and your savings account number on bank letterhead.
monthly, quarterly, etc.) as specified in my (our) agreements with Original	for amounts then due under my agreements with Originator in the frequency (i.e., inator. I (we) understand paper invoices may be discontinued. This authorization I or this authorization is canceled by written notice from me (or either of us) to Bank Account Holder Signature:
Print Name:	Print Name:
Print Title (if applicable): Date:	Print Title (if applicable): Date:
above (whether acting alone or through its servicer or any agent on its	C to email a PDF version of my invoices to me at the email address I provided behalf) when the invoice is generated. I acknowledge that paper invoices may be
	il the agreements are paid in full or this authorization is canceled by my written or Service Team will send you a confirmation letter and instructions to ensure your
Customer Signature:	
Print Name:	
Print Title (if applicable): Date:	
STOP Did you sig	n next to the red arrows?

Please send this completed and signed form to our Customer Service team by mail, email or fax to:

Mail:	Email:	Questions? Call us:
P.O. Box 2000 Attn: ITR Johnston, IA 50131	postbookingrequests@dllgroup.com	(800) 355-5024

DLL Finance LLC CUSTOMER AGREEMENT TO PROVIDE PHYSICAL DAMAGE INSURANCE

Date:

Customer's Name					2 3.13.
Address		City		State	ZIP
RE: Agreement dated	d	with DLL Finar	nce LLC, P.O. Box 3	3000, Johnston,	IA 50131
as Assignee, Lender o	or Lessor (the "Lender	.").			
physical loss or dama	age for the actual car corrosion, rust, mech	sh value of the following of anical or electrical breakd	equipment, subject down, etc. The mi	t to common ex	
Make	Model	EQUIPN Description	MENT Hrs. of U	Jse	Serial Number
-					
Laffirm that I will be no	oviding my own physi	cal damage insurance cov	erage through the R	RELOW LISTED	INSURANCE AGENT
Tamini that I will be pi	oviding my own pmysi	cai damage insurance cov	stage unough the b	CLOW LIGILD	INCOVANCE ACEIVI.
		TO DEBTOR'S INS	JRANCE AGENT		
		.C as a payee through a Le plicy as to the Loss Payee.		e Clause or sim	nilar clause which provides that
To my existing policy i	number	v	vith		
which now provide	es the coverage requir	ed.			
		30 days of any cancellatior any other person, shall not			tood and agreed that a breach of
	P.O. BOX 3000, JO				VIDENCING COVERAGE TO LLL 800-863-3660 OR EMAIL
PLEASE ATTACH A	COPY OF THIS NOTI	ICE TO THE PROOF OF II	NSURANCE.		
purposes only. I am	responsible for not	R: I acknowledge that co tifying my agent of my c ance coverage for perso	bligation to obtain	n physical dar	•
PLEASE BE SURE	E TO COMPLETE T	HE INFORMATION BE	LOW	-	
Insurance Agency/A	Agent's Name		Agent's E-Mail A	Address	
Mailing Address / Po	О Вох		Agent's Phone N	Number	Agent's Fax Number
0.14	01:1:	7'			
City	State	Zip Code			

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