

SIGNATURE CARD



(HEREAFTER REFERRED TO AS "BANK")

Name (Primary Owner) Shocker Holdings LLC		Account No. 7471853726	
Street Address 27 High Tech Blvd		Type Business Standard Checking	
City and State Thomasville NC		Zip 27360	
Home Phone	Date of Birth	Mother's Maiden Name	
Employer		Work Phone 336.475.4042	
Tax ID or S.S. Number 20-2636353		<input type="checkbox"/> NEW <input type="checkbox"/> ADD <input checked="" type="checkbox"/> REPL	
Ownership* Partnership	Opened By P Fintchre	BC No. 47349	Date 09/24/2013

**TERMS AND CONDITIONS**

1. The terms and conditions stated herein, together with resolutions or authorizations which accompany this signature card, if applicable and the Rules Regulations, Agreements, and Disclosures of Bank constitute the Deposit Agreement ("Agreement") between the individual (s) or entity (ies) named hereon ("Depositor") and the Bank.

2. This Agreement incorporates the Rules, Regulations, Agreements, and Disclosures established by Bank from time to time, clearing house rules and regulations, state and federal laws, recognized banking practices and customs, service charges as may be established from time to time and is subject to laws regulating transfers at death and other taxes.

3. All signers hereby agree that the above named bank is authorized to act as a depository under the terms and conditions of the Agreement.

4. Bank is authorized to recognize the signatures executed hereon in such numbers as indicated, for the withdrawal of funds or transactions of any other business regarding this account until written notice to the contrary is received by Bank.

5. In the case of overdraft or overpayment on this account, whether by error, mistake, inadvertence or otherwise, the amount of such overdraft or overpayment shall be immediately paid to Bank.

6. Depositor acknowledges and agrees that Bank, for itself and as agent for any affiliate of Fifth Third Bancorp, is granted a security interest in, and may, at any time, set off, against any balance in this account, any debt owed to Bank by any person having the right of withdrawal or any debt owed to Bank by any entity listed under the Account Title. A debt includes, but is not limited to, an obligation owing to Bank, whether now existing or hereafter acquired by Bank whenever payable and without regard to whether arising as maker, drawer, endorser, or guarantor.

7. All signers agree to the Terms and Conditions set forth hereon and acknowledge receipt of a copy of the Rules and Regulations, Agreements, and Disclosures of Bank and agree to the terms set forth therein.

\* Joint accounts shall be owned as joint tenants with right of survivorship, not as tenancy by the entireties

Check appropriate box for federal tax classification (required)

Individual/Sole Proprietor    Trust/Estate    Partnership  
 LLC - Enter tax classification (C=C Corporation, S=S Corporation, P=Partnership) S  
 C Corporation    S Corporation    Other \_\_\_\_\_    Non Resident Alien

**THE UNDERSIGNED AGREES TO THE TERMS AND CONDITIONS AT THE RIGHT**

Title:	Sig.(s)# Req'd	Non-US Person*	Senior Foreign Official**
Shocker Holdings LLC	1		
Brian L. Vickers x		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Ramona F. Vickers x		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
 x _____		Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
 x _____		Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

Payable on Death Beneficiary \_\_\_\_\_ Statement Address \_\_\_\_\_

**USA PATRIOT ACT REQUIREMENTS:**

\*1. Are you a Non-US person with more than \$500,000 on deposit or invested with Fifth Third?

\*\*2. Are you a Senior Foreign Official of a government branch, military branch, political party, foreign government-owned company, or a close personal or professional associate of one of these?

Verification - Internal Use Only:

Run Customer In Qualife \_\_\_\_\_  
 Verify Opening Deposit \_\_\_\_\_  
 Reg CC Hold (If Needed) \_\_\_\_\_  
 Verify Phone Numbers \_\_\_\_\_  
 Verify Address \_\_\_\_\_  
 Thank You Card/Follow Up \_\_\_\_\_