



CREDIT ACCOUNT SALES RECEIPT

DATE: _____

STORE NUMBER: _____

CUSTOMER NAME: _____

ACCOUNT NUMBER: _____

If you do not have the account number, you may use the patient's social and zip.

TOTAL SALE AMOUNT: _____

PROMOTIONAL PAYMENT PLAN:

NO INTEREST IF PAID IN FULL WITHIN ____ MONTHS

Interest will be charged to your account at a variable rate of 27.24% from the purchase date if the purchase balance is not paid in full within the promotional period or if you make a late payment. Required minimum purchase of \$250 for the 6-month plan and \$500 for the 12, 18, and 24-month plan. All plans may not be available at your particular physician's office.

Interest will be charged to your account at a variable APR of 27.24% from the purchase date if the purchase amount is not paid in full within the promotional period or if you make a late payment. To avoid late fees, you must make your Total Minimum Monthly Payments by the due date each month. The Minimum Monthly Payments may or may not be enough to pay off the purchase amount before the end of the promotional period. **To make sure you are not charged the interest accrued at variable APR of 27.24%, you must pay the total promotional purchase amount within the promotional period.**

EQUAL PAY 14.99% APR IF PAID IN FULL WITHIN ____ MONTHS

If the balance is not paid in full within the promotional period, regular credit terms will apply and interest will be imposed from the end of the promotional period at the standard, variable APR of 27.24%, based on the Prime Rate. Required minimum purchase of \$1,000 for the 24, 36, and 48-month plans and \$2,500 for the 60-month plan. All plans may not be available at your particular physician's office.

Minimum monthly payments for this plan during the promotional period will be the greater of the amount of the purchase, including the calculated finance charges that will be assessed from the date of purchase through the end of the promotional period, divided by the number of months in the promotional period, (rounded up to the nearest \$1.00); or \$5.00. **If you pay the required equal payment for this promotional plan, you should pay off the plan within the promotional period at the APR of 14.99%.**

BUDGET PAY 14.90% APR WITH MONTHLY PAYMENTS OF \$____

When you use your ALPHAÆON CREDIT Card Account, interest is assessed on promotional credit plan purchases from the date of purchase through the end of the promotional period at an APR of 14.90%. The length of the promotional period will be determined by the payment amount. Fixed minimum monthly payments for this plan during the promotional period will be a predetermined amount. Required minimum purchase of \$799 for the \$99-month plan, \$899 for the \$149-month plan, \$1,199 for the \$199-month plan, and \$1,799 for the \$299-month plan.

Please document the following information from the customer's valid photo ID:

TYPE OF PHOTO ID:

Please PRINT; do not use abbreviations or document ID #. Document military branch if applicable.

ID EXPIRATION _____

Please print the full date: mm / dd / yyyy

ID STATE _____

Please PRINT; do not use abbreviations

CUSTOMER'S FULL NAME _____

Please PRINT exactly as it appears on the ID

ACCOUNT HOLDER/AUTHORIZED USER LEGIBLE SIGNATURE

SIGNATURE DATE