



GE Healthcare Financial Services Practice Preferred Financing Program

Select the product(s) best suited for your business needs:

<input type="checkbox"/> Both Products:	<input type="checkbox"/> Equipment Line of Credit Only	<input type="checkbox"/> Business MasterCard® Only
Equipment Financing Line of Credit AND Business MasterCard® (Please see descriptions of each product at right.)	Use this line of credit for leases and loans for acquiring new equipment or technology for your practice. A separate schedule will be attached for all leases and loans. This schedule will detail all applicable payment terms. Approvals may be subject to guaranties by Authorizing Officer and/or other principals.	Use this account for general practice expenses and recurring purchases. Make monthly payments or pay all charges in full each billing period. Balances subject to finance charges. Authorizing Officer will be jointly and severally liable with the Company and personally guarantee payment of all amounts owed. We will contact you if financial statements are required to complete your application.

If an HFS Business MasterCard® Account is approved and opened, the Authorizing Officer listed below will be issued a Business MasterCard®.

Application Information—Company Information, Authorizing Officer and Business MasterCard® Information

Full Legal Name: _____

DBA Name: _____ Federal Tax I D: _____

Address (No P.O. Boxes): _____ City: _____ State: _____ Zip: _____

Business Phone: _____ Business Fax: _____ Email: _____

Type of Business: Corporation Partnership Proprietorship Sub S LLC LLP

Type of Practice: Medical Dental Eye Care Chiropractic Veterinary

Company Name as it should appear on Card (24 characters): _____ Years in Business: _____

Company designated Program Manager: _____

Program Manager DOB (MM/DD/YYYY): _____ Program Manager SSN (###-##-####): _____

Authorizing Officer: _____ Authorizing Officer License #: _____

Authorizing Officer Home Address: _____ City: _____ State: _____ Zip: _____

Authorizing Officer DOB (MM/DD/YYYY): _____ Authorizing Officer SSN (###-##-####): _____

Authorizing Officer Years of Industry Experience: _____ Authorizing Officer Years Licensed: _____ Authorizing Officer % Ownership: _____

Equipment Financing Line of Credit Account Information

Exempt from State Statute Sales & Use Tax? (Y/N) YES NO (If Exempt, please attach sales tax exemption certificate)

Related Entities/Affiliations: _____ State & Date of Incorporation: _____ # of Practitioners: _____

Annual Revenue: \$ _____ Prior GE HFS Account Number (if applicable): _____

INITIAL HERE TO ENROLL MY BUSINESS IN THE OPTIONAL PRODUCTIVITY POINTS REWARDS PROGRAM (Business MasterCard® Accounts Only).

By initialing to enroll in the optional Productivity Points Program ("Program") the Authorizing Officer acknowledges that the Program is optional and only available to the Company if the Company applies for and is approved for a GE Healthcare Financial Services (HFS) Revolving Business MasterCard® Account and an Account is opened. All rewards are subject to availability and certain restrictions imposed by the award providers will apply. The Company and the Authorizing Officer agree (1) to the Important Productivity Points Information provided with this Application, which is hereby incorporated by reference, and each agrees to be bound by the Productivity Points Program Terms and Conditions governing the Account, which will be sent to the Company upon approval and (2) that GE Capital Financial Inc. may bill the Authorizing Officer's account each year for the \$60 annual fee as provided in such Terms. Authorizing Officer can redeem points for travel, cash, merchandise and gift certificates.

By signing below and submitting this Application, the Authorizing Officer represents and agrees, personally and on behalf of the Company, as follows: (1) The information given in this Application is complete and accurate. (2) General Electric Capital Corporation ("GECC"), and GE Capital Financial Inc. ("GECF") and their successors and assigns, are authorized to check with credit reporting agencies, credit references and other sources with respect to each of the Company and the Authorizing Officer) in investigating the information given. (3) The Authorizing Officer is an authorized representative of the Company with authority to enter into borrowing agreements and to obligate the Company to repay indebtedness. If this application is for an HFS Revolving Business MasterCard® Account the Authorizing Officer personally guarantees the Company's performance on the Account. GECF may contact the Authorizing Officer (1) using all contact information provided by the undersigned to GECF, including without limitation, each phone number, email address, and/or text message address, (2) for all purposes, including collection purposes, (3) using methods where the Authorizing Officer may be charged for the communication (such as calling or sending a text message to an Applicant's cellular phone) and (4) using automated equipment. The Authorizing Officer understands that the credit on this Account(s), once approved will be extended by GECC if the Company requests an Equipment Line of Credit or by GECF if the Company requests an HFS Revolving Business MasterCard® Account, and that there is no binding contract between the Authorizing Officer and GECC or GECF until the applicable creditor approves and accepts this agreement. Additionally, the Authorizing Officer agrees to the important information provided with this Application, which is hereby incorporated by reference, and each agrees to be bound by the applicable terms and conditions for the HFS Revolving Business MasterCard® the credit agreement governing the Account (the "Credit Agreement"), which will be sent to the Company upon approval. A photo static or facsimile copy of this application and authorization shall be valid as the original. If the Company is approved for an Equipment Line of Credit, the Company, GECC and the Authorizing Officer will separately execute a Master Equipment Finance Agreement that sets forth the terms and conditions applicable to the Equipment Line of Credit. **Federal law requires us to obtain, verify and record information that identifies you when you open an account. We will use your name, address, date of birth, social security number and other information for this purpose.**

Signature of Authorizing Officer: _____ Name: _____ Date: _____

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract), because all or part of the applicant's income derives from any public assistance program, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law for GECC is the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580. The federal agency that administers compliance with this law for GECF is the FDIC Consumer Response center, 2345 Grand Boulevard, Suite 100, Kansas City, MO 64108.

If your application is denied by GE Capital Financial Inc. you will be provided with a written statement of the specific reasons for the denial within 30 days of our receipt of your completed application.

If GECC denies your application for an Equipment Line of Credit, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact HFS Operations Manager, General Electric Capital Corporation, One Beacon Street, 2nd Floor, Boston, MA 02108-3107, or call (800) 225-2488 within 60 days from the date you are notified of our decision. A written statement of reasons for the denial will be sent to you within 30 days of receiving your request for the statement.

Please fax back the pages of your application to us at 1 866 702 6319, or mail to
GE Healthcare Financial Services, One Beacon Street 2nd Floor, Boston, MA 02108-3107 or call us at 800 225 2488, option #5
or visit us online at www.practicepreferred.com Thank you.

Important Information Concerning Your Business MasterCard® Application

As used in this Application, the terms "we," "us," and "our" refer to GE Capital Financial Inc. (GECF) and its assigns; "Company" refers to the company identified in the Application; "you" and "your" refer to both the Company and the Authorizing Officer who submits the Application. By submitting the Application, you request that we establish a Business Card account ("Account") and issue a MasterCard® Credit Card ("Card") to you. The Account, and your use of the MasterCard®, will be governed by the credit agreement (the "Credit Agreement") you will receive upon Account approval. The Credit Agreement states that it will be governed by Utah and applicable federal law. You represent and warrant that this Application and the Credit Agreement are and will be legal, valid and binding obligations of each of you and that you are and have been duly authorized to, execute and deliver the Application. You further represent and warrant that all information provided in the Application and at any other time in connection with the Application or the Account is true and correct and acknowledge that we will rely on this information in connection with the establishment and maintenance of the Account. The Company and the Authorizing Officer each consent to our investigation of its credit history, and authorizes us to obtain a credit bureau report in connection with our review of this Application, and to obtain updated credit bureau reports on Company and personal credit reports on the Authorizing Officer from time to time. You also authorize us to release information to, and respond to inquiries from, others (including, without limitation, credit bureaus, our parent company, our affiliates, merchants and other financial institutions) regarding the existence, status, use and history of the Account. Company specifically authorizes us to rely and act on the instructions of the Authorizing Officer and any program manager designated by the Company, and Company confirms that actions taken by the Authorizing Officer or any program manager will be binding on the Company. You authorize General Electric Capital Corporation to provide to us, upon our request, information in its possession concerning Company and Authorizing Officer; and you authorize us to notify General Electric Capital Corporation whether this Application is approved, and to provide General Electric Capital Corporation with information regarding the existence, status, use, history of the Account and other related information.

NOTICE TO AUTHORIZING OFFICER: The Authorizing Officer's submission of the Application means that the Authorizing Officer and the Company are jointly and severally liable for repayment of the Account and that the Authorizing Officer is personally guaranteeing the Company's performance under the Credit Agreement. By submitting the Application, you consent to our investigation of your personal credit history and authorize us to exchange information about you as stated above. If the Authorizing Officer is a resident of New York, we will inform him or her, upon request, whether or not a consumer report was requested, and if so, the name and address of the consumer reporting agency that furnished the report. You understand and agree that because our products are business products, all information relating to you and/or the Account, (including, without limitation, account and application information, purchase and payment activity, and balance and status information) may be shared with Company, and with any designated program manager(s) for the Company. You should have no expectation that this information will remain private from the Company.

PROGRAM MANGER: The person indicated on this Application as the Program Manger is hereby designated by the Company as duly authorized representative and as our primary point of contact with respect to the Card(s) and Account. The Company agrees that all actions of the Program Manger may be relied upon by us as the duly authorized actions of the Company. The Company may change its designated Program Manger or authorize one or more additional Program Managers at any time, upon written notice from the Authorized Officer to us at the address below.

ACCOUNT FOR BUSINESS OR COMMERCIAL PURPOSES ONLY: The Account will be opened in the name of Company. The Account is established only for the purpose of purchasing goods and/or services to be used for business or commercial purposes on behalf of Company. Company and Authorizing Officer agree not to use or permit anyone to use the Account to purchase goods and/or services for personal, family or household purposes. In this regard, Company and Authorizing Officer understand that their agreement not to use the Account for personal, family or household purposes means that important duties imposed upon GECF in certain consumer transactions, and important rights conferred upon a consumer pursuant to applicable federal and state laws, will not apply to the Account. You also understand that we will be unable to determine whether any given purchase conforms to this commercial use restriction, and you agree that a breach of this restriction will not affect our right to enforce your promise to pay for the credit extended on the Account, including related charges, or to use any legal remedy available to us even if that remedy would not have been available had the Account been established as a consumer credit account.

Important Productivity Points Information

PARTICIPATION ENROLLMENT, PROGRAM FEES: Participation in the Program is restricted to those U.S. Companies with a Company Bill Account who accept the terms of the Program. The Program is sponsored by GECF. GECF reserves the right to terminate, change or temporarily suspend the Program or change the Program Rules, regulations, fees, or awards at any time with or without notice. The Company's participation in the Program will be renewed automatically each year on the enrollment date anniversary as long as Account is open and in good standing and Company's participation in the Program has not been terminated. On the enrollment date anniversary the then-current Program annual fee will be billed to the Authorizing Officer Account or separately invoiced to the Company. The current membership fee for a Company Bill Account is \$60 annually. No refund will be given once the annual fee has been charged to the Account unless Authorizing Officer notifies GECF within the first 30 days after the enrollment date of Company's termination of its participation in the Program.

TERMINATION OF PARTICIPATION IN PROGRAM: Company must notify GECF in writing at ProductivitySM Card, P.O. Box 520310, Salt Lake City, UT 84152-0310, not less than thirty (30) days prior to the enrollment date anniversary of Company's termination of its participation in the Program. GECF reserves the right in its sole discretion to approve, deny or terminate participation in the Program or not allow points redemption for any reason whatsoever. All points in Company's Program account are forfeited immediately upon any termination of Company's participation in the Program.

ACCUMULATING POINTS: Once enrolled in the Program, the Authorizing Officer will accumulate 1 point for each full U.S. dollar in net purchases (goods and services, minus any credits, returns or to other adjustments related to those purchases, and exclusive of fees, finance charges, cash advances, balance transfers, traveler's checks, convenience checks and U.S. Postal charges), made by each Cardholder after the enrollment date. A maximum of 15,000 points may be accumulated each month. A maximum of 180,000 points may be accumulated in each calendar year. Only the Authorizing Officer, or his/her designee, may redeem points. Points will expire in the calendar month of the third year after the year they are received. Points will be redeemed and will expire on a first in first out basis.

POINT REDEMPTION: Points may not be redeemed unless the Account is in good standing and Company is enrolled in the Program. All rewards are subject to availability and certain restrictions imposed by the award providers will apply. You should contact the Rewards Service Center for a full statement of the restrictions applicable to the desired award or see www.productivityrewards.com for details and full Program terms.

OTHER RULES/LIMITATIONS OF LIABILITY: Program point accrual and redemption cannot be used in conjunction with any other credit card reward programs offered by GECF. The Program is void where prohibited by federal, state, or local law. The Program terms and conditions are governed by the laws of the State of Utah.

HFS Revolving Business MasterCard® Account The Key Credit Terms as of February 26, 2007

Annual Percentage Rate (APR) for Purchases	One of the following variable APRs will be assigned to your Account upon approval: 10.85%, 13.25%, 15.85% or 23.25% .								
Other APRs	Cash Advance APR: 23.24% variable Delinquency Rate*: 31.99% variable Cure Rate* 20.00% variable								
Variable Rate Information	APRs will vary. The APR for purchases will equal Prime Rate** plus a margin of either 2.60%, 5.00%, 7.60%, or 15.00%, depending on Company's credit information and Authorizing Officer's personal credit information. The APR for Cash Advances will equal Prime Rate plus a margin of 14.99%. The Delinquency Rate will equal Prime Rate plus 23.99% but not higher than 31.99%. The Cure Rate will equal Prime Rate plus 11.75%.								
Grace Period for Repayment of the Balance for Purchases	25 days if total Balance is paid in full by the payment due date on the billing statement; otherwise none.								
Grace Period for Repayment of the Balance for Cash Advances	None.								
Method of Computing the Balance for Purchases	Average Daily Balance including new purchases.								
Annual Fee	None.								
Minimum Finance Charge	\$1.00.								
Late Payment Fee	<table style="width: 100%; border: none;"> <tr> <td style="width: 60%;">Amount of New Balance</td> <td style="text-align: right;">Late Payment Fee</td> </tr> <tr> <td>Less than \$100</td> <td style="text-align: right;">\$15</td> </tr> <tr> <td>\$100 - \$249.99</td> <td style="text-align: right;">\$29</td> </tr> <tr> <td>\$250 or more</td> <td style="text-align: right;">\$39</td> </tr> </table>	Amount of New Balance	Late Payment Fee	Less than \$100	\$15	\$100 - \$249.99	\$29	\$250 or more	\$39
Amount of New Balance	Late Payment Fee								
Less than \$100	\$15								
\$100 - \$249.99	\$29								
\$250 or more	\$39								
Transaction Fee for Cash Advances: 3% of amount of each Cash Advance, but not less than \$3 or more than \$50; Over Limit Fee: \$29; Returned Payment Fee: \$29; Stop Payment Fee: \$29; Foreign Transaction Fee: 2%; Other fees apply as set forth in the Credit Agreement									

*Delinquency APR will apply if you fail to make your required minimum payment by the due date two or more times (which need not be consecutive) in any twelve-month period. Once your Account is subject to the Delinquency APR, if you pay all past due amounts and any fees, and you pay your minimum monthly payment on time for twelve consecutive months, the Cure APR will apply to your Account beginning the first day of the next billing period.

**The Prime rate is the highest bank prime loan rate as published in The Wall Street Journal in its Money Rates section on the twenty-fifth (25) business day of the calendar month immediately preceding the first day of such billing period.

The information about the costs of the Account described above is accurate as of February 26, 2007. This information may have changed after that date. To find out what may have changed, write us at P.O. Box 520310, Salt Lake City UT 84152-0310.

Accounts are owned and credit is extended by GE Capital Financial Inc. Productivity is a service mark of GE Capital Financial Inc. © 2007 GE Capital Financial Inc.