

BROKERAGE FEE ACKNOWLEDGEMENT

I,	, acknowledge that I will be charged an
PLEASE	PRINT FULL NAME
auto brokerag	e service fee of \$395.00, which is due in full at the time of vehicle delivery.
Additionally,	I have read, understand and am in agreement with the disclosure statement
noted below.	
	
Signature	Date
Optim 222 W.	y request that all checks or money orders be made payable to: um Auto Network 6th Street Suite #406 dro, CA 90731
returned checks to be forwarded to	STATEMENT: Please be advised there is a \$25.00 fee for all returned checks. Additionally, any that are not validated in the form of a cashier's check, money order or cash within 5 business days will collections which, in turn, will incur additional costs. If litigation becomes necessary, all litigation sets will be the responsibility of the writer of the void check.
in accordance w	or claim arising out of or relating to this contract, or the breach thereof shall be settled by arbitration ith the Uniform Rules for Better Business Bureau Arbitration, and the judgement upon the award Arbitrator(s) may be entered in any Court having jurisdiction thereof.
Optimum Aut	o Network 222 W. 6th Street Suite #406 San Pedro, CA 90731 Office #: <u>+1-310-456-789</u>