

## "The World's Finest Filtration and Fryer Management Service"

1. Name: John Michals

2. Franchise Location: New Jersey

3. Bio (past work experience): Managing Momber of a successful financial services brokenge firm specifically dealing with energy commodifies.

4. What attracted you to FiltaFry Franchise? (eg. Positive Environmental Impact)

- Ability to exercise my entrepourial spirit
- positive impact on both customers positive impact on the overall environment

5. What are your goals with FiltaFry?

- my quak are to build a multiven / multiscruen/ multi territury business. I went to contine to empower those that have worked for me and those that will inthe future by creating a sustainable and financially profitable business.

6. Any Personal or unknown info you'd like to share:

- I'm advising goal oriental person by nature. I view my success as very much my own doing and responsibility. I suscribe to the notions of personal and professional accountability. In the ord, I am incontrol and in charge of my desting.

# **Local Web Page Application & Agreement**



Welcome to the local web page program. Once you return all of the information, and you meet all requirements, your page can go live and start to generate local leads for your Filta business!

As a simple checklist, we need from you:

- 1. Photo of you (and employees) next to your van in the Filta uniforms
- 2. Local written customer endorsements
- 3. Completed Details in the form below

Your Name	John Michals
City to be shown in header	Newark
Cities Serviced (to be shown on your page)	Numerous locations cuthin Greater Essex and Berger Counties
Preferred Area Code for Web#	917 - 512 - 6658
Phone# to forward calls to	732-598-1068

#### How the program works

- We set up and maintain a localized web page for you to help generate local service leads.
- We set up a separate local virtual phone number for marketing tracking purposes. Calls are forwarded to the
  phone of your choice and recorded so we can track marketing and continue to improve pay per click response
  rates.
- We set up a local city email address that is forwarded directly to your gofilta email address. Copies are sent to a centralized email box so that we can track marketing and continue to improve pay per click response rates.
- All of the costs, including initial set up is paid for from the centralized marketing fund.

I understand that to be eligible for a local webpage, I must be in full compliance with my franchise agreement. I further understand all calls forwarded through the virtual number will be recorded. I agree to ask for the current validation password prior to speaking to individuals requesting information on the Filta franchise opportunity or to direct the caller to the corporate office. At the sole discretion of Filta the webpage may be suspended or service inquires forwarded to the corporate office.

I grant to The Filta Group the irrevocable right and unrestricted permission concerning any photographs, video or other recordings that they have taken or may take of me or in which I may be included with others, to use, reuse, publish, and republish the media in whole or in part, individually or in connection with other material, in any and all media now or hereafter known, including the internet, and for any purpose whatsoever without restriction; and to use my name and biographical information in connection with any use. I release and discharge Filta from any and all claims and demands that may arise out of or in connection with the use of the media.

Signature

Date



# **Trading Information Sheet**

Name:	John Michals
Title to appear on Business Cards	President
Trading Name:	Dorado Environmental Inc.
Trading Address:	60 Park Place, Surk 502
City and State	Newark, New Jersey 07102
Zip code:	07102
Contact Address: (If different from above)	297 Eudid Avonce
State / Zip	Manasquan, NJ 08736
Business Telephone Number:	Manasquez, NJ 08736 917-512-6658
Business Fax Number:	N/A
Business E-Mail Address (Franchise Operator's FirstName.LastName@gofilta.com):	JOHN. MICHALS C GOFILTA. COM
Cell Number:	732-598-1058
Alternative Contact Numbers: (if any)	
	Uniform
Boot Size: 10.5-11	Large

Please complete and return this sheet at least 4 weeks before the trading date.

## Media Release Form



I grant to The Filta Group the irrevocable right and unrestricted permission concerning any photographs, video or other recordings that they have taken or may take of me or in which I may be included with others, to use, reuse, publish, and republish the media in whole or in part, individually or in connection with other material, in any and all media now or hereafter known, including the internet, and for any purpose whatsoever without restriction; and to use my name and biographical information in connection with any use. I release and discharge Filta from any and all claims and demands that may arise out of or in connection with the use of the media.

John Michals

Name

Signature

15/2019

Date

(Rev. November 2017) Department of the Treasury Internal Revenue Service

### **Request for Taxpayer Identification Number and Certification**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

	1 Name (as shown on your income tax return). Name is required on this line;	do not leave this line blank.																	
	Dorado Environmental Inc.																		
	2 Business name/disregarded entity name, if different from above																		
bage 3.	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.					4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):													
e. ns on	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ T single-member LLC				Trust/estate Exempt payee code (if any)														
tion	Limited liability company. Enter the tax classification (C=C corporation,							-											
Print or type. See Specific Instructions on page	Note: Check the appropriate box in the line above for the tax classification of the single-member owner.  LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member is disregarded from the owner should check the appropriate box for the tax classification of its owner.					Do not check of the LLC is													
ecil	☐ Other (see instructions) ►					(Applies to accounts maintained outside the U.S.)													
Sp	5 Address (number, street, and apt. or suite no.) See instructions.					ester's name and address (optional)													
See	60 Park Place, Suite 502																		
0,	6 City, state, and ZIP code																		
	Newark, NJ 07102																		
	7 List account number(s) here (optional)																		
Par																			
	your TIN in the appropriate box. The TIN provided must match the na			Social security number							_								
backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other							_												
entities, it is your employer identification number (EIN). If you do not have a number, see How to get a							_												
TIN, la		1 Alas ass What Name a		or Employer identification number															
<b>Note:</b> If the account is in more than one name, see the instructions for line 1. Also see <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.				T	T T		T	T		=									
			8	3 .	- 3	0 8	1	4	1	4									
Par	Certification							ا نا			_								
	penalties of perjury, I certify that:										_								
	number shown on this form is my correct taxpayer identification nun	nber (or I am waiting for a	number to	be iss	ued t	o me): a	and												
2. I an Ser	n not subject to backup withholding because: (a) I am exempt from b vice (IRS) that I am subject to backup withholding as a result of a failt longer subject to backup withholding; and	ackup withholding, or (b)	I have not	been n	otified	by the	Inte				m								
	n a U.S. citizen or other U.S. person (defined below); and																		
	FATCA code(s) entered on this form (if any) indicating that I am exen	nnt from FATCA reporting	is correct																
Certifi	ication instructions. You must cross out item 2 above if you have been ave failed to report all interest and dividends on your tax return. For real e	notified by the IRS that you	are currer	ntly subj						ecau	ise								
acquis	ition or abandonment of secured property, cancellation of debt, contributhan interest and dividends, you are not required to sign the certification,	tions to an individual retire	ment arran	gement	(IRA)	and ge	nera	lly, pa	ayme	ents iter.									
Sign Here		Date > 1/13/2019																	
	neral Instructions	<ul> <li>Form 1099-DIV (div funds)</li> </ul>	idends, inc	luding	those	from s	tock	s or r	nutu	ıal									
Section	on references are to the Internal Revenue Code unless otherwise	Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)																	
<b>Future developments.</b> For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to <a href="https://www.irs.gov/FormW9">www.irs.gov/FormW9</a> .		<ul> <li>Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)</li> </ul>																	
		<ul> <li>Form 1099-S (proceeds from real estate transactions)</li> </ul>																	
Pur	pose of Form	<ul> <li>Form 1099-K (merchant card and third party network transactions)</li> <li>Form 1098 (home mortgage interest), 1098-E (student loan interest),</li> </ul>																	
inform	lividual or entity (Form W-9 requester) who is required to file an lation return with the IRS must obtain your correct taxpayer	1098-T (tuition)		iterest),	1098	3-E (stud	dent	loan	inte	rest),									
identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption		<ul> <li>Form 1099-C (canc</li> <li>Form 1099-A (acqui</li> </ul>		andon	nent :	of ecour	od n	ropo	rtvi										
taxpay (EIN),	ver identification number (ATIN), or employer identification number to report on an information return the amount paid to you, or other	Use Form W-9 only							•	nt									
amou	nt report on an information return. Examples of information		Correct TI							alien), to provide your correct TIN.  If you do not return Form W-9 to the requester with a TIN, you might									

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding,

• Form 1099-INT (interest earned or paid)