ITEMIZATION OF AMOUNT FINA	ANCED	Acres 10 to	Insurance. You may buy the physical damage insurance this contract requires from anyone you choose who is
1 Cash Price (including \$ 599.50 delivery and handling charge‡		\$(1)	acceptable to us. You may also provide the physical
and \$ N/A sal	es tax)		damage insurance through an existing policy owned or
			controlled by you that is acceptable to us. You are not required to buy any other insurance to obtain credit unless
2 Total Downpayment =			the box indicating Vendor's Single Interest Insurance is
Trade-In	N/A N/A		required is checked on page 1 of this contract. If any insurance is checked below, policies or
(Year) ((Make) (Model)		certificates from the named insurance companies will
Gross Trade-In Allowan	ce	\$N/A_	describe the terms and conditions.
Less Pay Off Made By	Seller to	\$N/A_	Check the insurance you want and sign below:
Equals Net Trade In		\$N/A_	Optional Credit Insurance
+ Cash		\$N/A_	☐ Credit Life: ☐ Buyer ☐ Co-Buyer ☐ Both
+ Other N/A		\$N/A_	☐ Credit Disability: ☐ Buyer ☐ Co-Buyer ☐ Both
			Departure
+ Other N/A		\$N/A	Credit Life \$N/A
	s negative, enter "0" and see 4I below)		Credit Disability \$N/A_
3 Unpaid Balance of Cash Price		\$ 29785.50 (3)	Insurance Company NameN/A
		φ(0)	N/A
-	ounts Paid to Others on Your Behalf		Home Office AddressN/A
(Seller may keep part of these			N/A
•	surance Paid to Insurance Company or Companies. \$ N/A		Credit life insurance and credit disability insurance are not required
Life			to obtain credit. Your decision to buy or not to buy credit life
Disability		W	insurance and credit disability insurance will not be a factor in the credit approval process. They will not be provided unless you sign
	nsurance Paid to Insurance Company		and agree to new the extra cost If you choose this insurance the
	Paid to Insurance Company or Companies		I cost is shown in Item 4A of the Itemization of Amount Financed.
D Optional GAP Agreement		\$N/A	Credit life insurance is based on your original payment schedule. This insurance may not pay all you owe on this contract if you make
E Official Fees Paid to Gove			liste navments Credit disability insurance does not cover any
	for N/A		increase in your payment or in the number of payments. Coverage for credit life insurance and credit disability insurance ends on the
to N/A	for N/A	\$N/A	original due date for the last payment unless a different term for the
	for N/A		insurance is shown below.
F Government Taxes Not In			
· Cotoninion rape		s N/A	
G Government License and	/or Registration Fees		
N/A	The global and Troop		
	TOID DEDMIT AAA	\$ 24.44	
	TRIP PERMIT 4.44	\$ 7.20	Other Optional Insurance
H Government Certificate o		\$	
Other Charges (Seller mu	ust identify who is paid and describe purpose)		Type of Insurance Term
to N/A	for Prior Credit or Lease Balance	\$N/A	
to N/A	for N/A	\$	Premium \$N/A
to N/A	for N/A	\$N/A_	Insurance Company NameN/A
to N/A	for N/A	\$N/A	NA
to N/A	for N/A	\$	Home Office AddressN/A
to N/A	for N/A	\$N/A	N/A
to N/A	for N/A	s N/A	□ N/A N/A
to N/A	for N/A	\$N/A	Type of Insurance Term
to N/A	for N/A	\$N/A_	Premium \$ N/A
to N/A	for N/A	\$ N/A	Insurance Company NameN/A
to N/A	for N/A	\$NA_	NA
to N/A	for N/A	\$NA_	Home Office AddressN/A
	for N/A	\$NA_	N/A
to N/A	d Amounts Paid to Others on Your Behalf		Other optional insurance is not required to obtain credit. Your
	Amounts Paid to Others on Your Benail	\$\$(4)	decision to buy or not buy other optional insurance will not be
5 Amount Financed (3 + 4)		\$(5)	a factor in the credit approval process. It will not be provided
‡The delivery and handling of	charge represents costs and profit to the Seller/Credit	or.	unless you sign and agree to pay the extra cost.
			I want the optional credit insurance and the other insurance checked above.
OPTION: ☐ You pay no finance charge if the Amount Financed, item 5, is paid in full on or before			
			X N/A N/A Buyer Signature Date
			The state of the s
☐ If this box is checked, the following late charge applies to vehicles purchased primarily for business or			X N/A N/A
agricultural use.			Co-Buyer Signature Date
If a payment is not received in full within N/A days after it is due, you will pay a late charge			THIS CONTRACT DOES NOT PROVIDE FOR
of \$ N/A or N/A % of the part of the payment that is late, whichever is less.			AUTOMOBILE LIABILITY INSURANCE, AND
If this box is not checked, the late charge in the "Federal Truth-In-Lending Disclosures" still applies.			SAID BUYER ALSO STATES THAT HE OF
			SHE HAS/BOKS MOX NAME A trike words no
	tomobile Protection (GAP) Agreement. A		applicable) IN EFFECT AN AUTOMOBILE
to obtain credit or any pa	rticular or favorable credit terms. Neither v	vill be provided unless you sign	LIABILITY POLICY AS DEFINED IN SEC
whether similar covered	tra charge. You may wish to consult an ge may be obtained and at what cost.	Gap protection benefits may	TION 42-7-103(2), COLORADO REVISED
	f this contract. You may cancel gap protec		STATUTES, ON THE MOTOR VEHICLE SOLD BY THIS CONTRACT.
30 days after you purcha	ased it and receive a full refund of the gap	p protection fee or premium as	SOLD BY HIIS CONTRACT.
long as no loss or eve	nt covered by gap protection has occur	rred. Gap protection is not a	
	r property damage insurance. If you choose		
charge is snown below a	and in Item 4D of the Itemization of Amour	n rinanced.	
Charge \$N/	A Term: N/A	The second secon	
N/A	/N		
	(Name of GAP Agreement)		
I want the GAP agreement	t.		
X N/A		The state of the s	
Buyer Signature		Date	
V			
X N/A		Data	* x x x x

Buyer Initials X