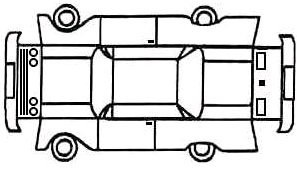


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|--|--|--------------------------------------|-------------------------------------|---|----------------------------|---|--|---------------------------|-------|-------|--|-------------|-----|-----|--|---|-----|-----|--|-------------|-----|-----|--|---|--------|------|--|-----------------------------|--|--|--|-------|--|
| CUSTOMER NAME Art Vandelay | | | | VEHICLE NO. 20125 | | LICENSE NO. / STATE Temp | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| HOME ADDRESS 135 West 35th St. Apt. 5A | | CITY New York | STATE NY | ZIP CODE 10101 | ODOMETER OUT 324 | ODOMETER IN 436 | YEAR AND MAKE OF VEHICLE 2013 FORD | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DRIVER'S LICENSE NO. 45839654645 | | STATE NY | | EXP. DATE 12/31/2015 | MILES DRIVEN | MODEL AND COLOR OF VEHICLE FUSION BLACK | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| BIRTH DATE 07/12/1980 | SOCIAL SECURITY NO. (212) 555-5486 | | HOME PHONE (212) 555-5486 | VERIFIED | MILES ALLOWED | DATE AND TIME OUT 04/28/15 8.00 | DATE AND TIME IN | | | | | | | | | | | | | | | | | | | | | | | | | | |
| LOCAL CONTACT Marriott Hotel | | ADDRESS | | PHONE | CHARGEABLE MILES | DATE DUE EXPIRATION OF CONTRACT 04/30/2015 8.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CORPORATE ACCOUNT NUMBER 123456E8 | | | | MAX. PAYLOAD | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| EMPLOYER Vandelay Industries | | | | PHONE (212) 854-5599 | | RENTAL RATES DO NOT INCLUDE FUEL | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| EMPLOYER'S ADDRESS 135 W 85th St. | | CITY New York | STATE NY | ZIP CODE 10101 | HOURS @ \$ 16.00 | /Hour | CHARGES | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CUSTOMER INSURANCE INFORMATION | | | | TOTAL MILEAGE AND RENTAL CHARGES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Insurer Progressive | | Agent | | REFUELING GAS 4.88 | | GALS. @ \$ | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Policy No. V4262366 | | Expiration Date 12/31/2017 | | Telephone | | SUB TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>ONLY THE BELOW NAMED PERSONS ARE AUTHORIZED AS ADDITIONAL DRIVERS. IF NONE, PRINT "NONE" ACROSS THIS SECTION AND HAVE SIGNED BY CUSTOMER.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align: center;">OUT FUEL IN</td> <td></td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;">Empty</td> <td style="text-align: center;">Empty</td> <td></td> </tr> <tr> <td>NONE</td> <td style="text-align: center;">1/4</td> <td style="text-align: center;">1/4</td> <td></td> </tr> <tr> <td>NAME _____ DRIVER'S LICENSE # _____ AGE _____</td> <td style="text-align: center;">1/2</td> <td style="text-align: center;">1/2</td> <td></td> </tr> <tr> <td>NONE</td> <td style="text-align: center;">3/4</td> <td style="text-align: center;">3/4</td> <td></td> </tr> <tr> <td>NAME _____ DRIVER'S LICENSE # _____ AGE _____</td> <td style="text-align: center;">->Full</td> <td style="text-align: center;">Full</td> <td></td> </tr> </table> | | | | OUT FUEL IN | | | | | Empty | Empty | | NONE | 1/4 | 1/4 | | NAME _____ DRIVER'S LICENSE # _____ AGE _____ | 1/2 | 1/2 | | NONE | 3/4 | 3/4 | | NAME _____ DRIVER'S LICENSE # _____ AGE _____ | ->Full | Full | | FUEL PURCHASE OPTION | | | | gals. | |
| | | | | OUT FUEL IN | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | Empty | Empty | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | NONE | 1/4 | 1/4 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | NAME _____ DRIVER'S LICENSE # _____ AGE _____ | 1/2 | 1/2 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NONE | 3/4 | 3/4 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME _____ DRIVER'S LICENSE # _____ AGE _____ | ->Full | Full | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FUEL PURCHASE OPTION | | | | DECLINES X | ACCEPTS | SUB TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>By initialing, You accept or decline to pre-purchase a full tank of fuel from Us at \$ 1.78 per gallon. If you decline the Fuel Purchase Option and return the Vehicle with less fuel than when rented, You agree to pay Us a refueling charge of \$ 4.88 per gallon to return the fuel level to the same as when rented.</p> <p style="text-align: center;">DAMAGE DESCRIPTION</p> <p>Initials _____ Condition Out: _____</p>  <p>Condition In: _____</p> | | | | Sales Tax 7.000% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | Airport Concession 2.500% | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | FreqFly | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | SUB TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | LESS CREDITS | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | TOTAL CHARGES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | LESS DEPOSIT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | BALANCE DUE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | CASH REFUND | | CUSTOMER INITIALS | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | ALL CHARGES SUBJECT TO FINAL AUDIT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | By signing below, you: agree to the terms and conditions of this Rental Agreement. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | Your Signature | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| RETURN LOCATION (IF DIFFERENT FROM LICENSEE'S LOCATION) Main | | | | EXTEND TO | ADDITIONAL CASH DEPOSIT | DATE | INITIALS | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VEHICLE CONDITION OUT | | SPARE & TACK | CUST. INIT. | CHECKED OUT BY: 1 | | CHECKED IN BY: | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| IN | | | | CUSTOMER SIGNATURE X | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CREDIT CARD | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |