FIRST CHOICE PRACTICE SALES, INC.

a California Corporation (01916111)

RENT ONLY \$1,500! 100% ASSOCIATE RUN! REMODELED AND GREAT PARKING!

	22 - 336		KICE:	φ302,000	ODO.		A/R'S	• 110	
LOCATION:	Ontario		Est. 2019 POP			PULATION: Hispanic			
DESCRIPTION:			# Not Plumbed:			Sq. Ft. 1,104 +/-			
Lease X	Own	Option/Ren	ew 1 x 5	Yrs. Re	main 2		\$/Month	\$1,500 tota	.1
Office Hours	M	T	W	T	Н	FR	SAT	Γ	SUN
	9 - 6 A1	staff	9 – 6 A1	sta	off	9 – 6 A2	close	od.	closed
STAFF	Front:		Salary:		l .		1	Fransition /	
STAFF	Back:		·	\$17 / hr					
	Other: Ass					•			eition
			Salary: 1 -					Yes 1, 2 - transition $30 - 60 \text{ days}$	
	Other:	<u>Silier</u>	Salary:	\$3007	uay	VVIII	ыау	30 – 60 da	lys
PATIENT PROF	ILE:								
% Group	5-10 Yrs:	<u>2</u> % 1	1-19 Yrs:	17%	20-49 Y	/rs <u>:</u>	58%	50-75+:	23%
% Reimb	Cash	33%	Idemn		PP	O 10%		Plans	
	Medical	57%	Cap	0%	Avg. Ca	ıp		- -	
% Revenue	Restorative	_32% Cro	wn & Bridge	27%	End	lo	9%	Perio	12%
	Oral Surgery	9%	Prosthetics	11%	Orth	10	0%		
Procedures	referred out:	Implants, som	e pedo, ortho	, retreats	,				
PRACTICE STA	TS: *(Need to v	erify with Ruy	er Audit) (anı	nroy)					
	# Active Charts	-		_	Recalls 1	per month	*		
	ents per month*				-	•			21!
Any one referral s								No	
Does practice employ a hygienist?			•						
FINANCIAL: (No			,				,, ,,		
	51,274				-		TD	Pendin	ıg
EQUIPMENT:				<u></u>					8
	irs4	Hvgien	ie			Avg.	Age	Mixed n	ewer
	ys 2 digital								
" 1 1 1	.js <u>2 aigitai</u>		10011	_					
Special Equip ow	ned: L	aser	Intra	oral Can	nera		Oth	er	
Is the practice cor						Software:			
COMMENTS:									

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REGISTRATION AGREEMENT - CONFIDENTIALITY

IMPORTANT: Please fax back this form to obtain the office location and financial data @ 949-548-0525

In consideration of FIRST CHOICE PRACTICE SALES INC., hereinafter called FIRST CHOICE, supplying me with confidential information concerning the following businesses, or any other businesses to which you may otherwise introduce me, I agree to use such confidential information obtained only for purposes of evaluation to purchase. I further agree not to divulge such information to others, except to secure professional advice. I further agree not to directly contact the owner, employees, landlord, suppliers or disturb any business relationship which includes requesting a position as an associate or asking for permission to visit the practice during practice hours of the seller without first obtaining seller's permission through FIRST CHOICE PRACTICE SALES, INC.

Should I, or anyone to whom I have introduced those confidential business listings that you previously presented to me, purchase or acquire an interest in any of those businesses, I agree to conduct all negotiations through your office. I further understand that the seller will be responsible for the payment of the commission to **FIRST CHOICE PRACTICE SALES**. I further understand and agree that if I should purchase all or any portion, lease, become an associate of or come into possession of the business through direct negotiations with the seller and without **FIRST CHOICE's** involvement, within one year from date hereof, then a commission is due **FIRST CHOICE** and I will assume responsibility for the payment of that commission.

The commission referred to above is ten percent (10%) of the total purchase price or \$12,500, whichever is greater. Should any controversy arise as a result of this agreement, **FIRST CHOICE** and I hereby agree to have the matter settled by and under the rules of the American Arbitration Association without the necessity of a court order. All rights of discovery allowed by law may be used and the prevailing party shall be entitled to actual attorney fees and costs. Any decision shall be final and binding upon myself and **FIRST CHOICE**.

NO AGENCY RELATIONSHIP IS CREATED BY SIGNING THIS AGREEMENT.

Listing No. 21 – 336	Location	Ontario
Accepted and Agreed to:		
Signature		Agent
Print Name		Print Name
Date		Date
Address	<u> </u>	P. O. Box 8445 Newport Beach, CA 92660 (949) 548-4559
City Z	ip	Any additions or deletions to this page other than information we have
Phone (Circle One: Mobile/Home/Business) F-mail Address		requested will void your request and we will not provide any additional information. Thank you.
E-mail Address		

PLEASE FAX BACK TO: 949 548-0525