FIRST CHOICE PRACTICE SALES, INC.

a California Corporation (01916111)

MIX OF PPO & FFS! GREAT FEES! EXCELLENT PATIENT BASE! GREAT RECALL & HYGIENE!

NET OVER 45%!!

LISTING #	22 - 586	PRICE		E: \$699,000		A/R'S: Negotiable			
LOCATION:	Brea		Est. (1990) 2019		19 F	POPULATION: Mixed			
DESCRIPTION:	# of C)ps: 4	# Not Plur	nbed:	_ Sq. Ft	1,500 +/-			
Lease X	Own	Option/R	Renew 1 x 5	Yrs. Rema	ain <u>3+</u>	\$/Montl	h \$5,250	total	
Office Hours	M	T	W	TH	FR	SAT		SUN	
_	8-5	8-5	8-5	8 – 5	8-5	Closed		Closed	
STAFF	Front: _	1	Salary:	\$25 / h	<u>r</u> W	ill Stay	Yes		
	Back:	1 – DA	Salary:	\$20 / h	<u>r</u> W	ill Stay	Yes		
	Back:	Hygienist	Salary:	\$500 / da	ay W	ill Stay	Yes		
PATIENT PROF	<u> ILE:</u>								
% Group	5-10 Yrs:	11-	-19 Yrs:	20-4	9 Yrs:		50-75+: _		
% Reimb	Cash	63%	Idemn		PPO 37%)	Plans _		
	Medical	0%	Cap 0	% Avg	. Cap	\$0	_		
%Revenue	Restorative	36% Crow	n & Bridge _	35%	Endo	1%	Perio _	8%	
	Oral Surgery	5%	Prosthetics _	1%	Ortho	4% In	nplants _	10%	
Procedures referred out:									
PRACTICE STATS: *(Need to verify with Buyer Audit) (approx)									
	# of Recalls per month*								
			2 Total # of New Patients YTD*						
			actice revenue? Yes			No			
-	_	S Number of days 3-4 % of G			2	<mark>20%</mark>			
FINANCIAL: (Need to verify with Tax Returns and Financial Information by Seller)									
2019\$6	506,707	2020 \$423,41	1 (6 mos) 20)21 \$729,43	33 Currer	nt YTD\$8	346,192 as	of 10/31	
EQUIPMENT:									
# Cha	irs 4 Adec NEV	<u>W!</u> Hygiene			Avg. A	\ge	Newer		
# X-Ra	ays 4 (1 sensor	·) Pano	CT – PAX I	Duo3D NEW!	Othe	r <u> </u>	aperless		
Special Famin armed. Larger Comini. Inter-coal Commun. District.									
Special Equip owned: Laser Gemini Intraoral Camera DigiDoc Other Latha practice computational? Vec. Type of Software Open Deptel									
Is the practice computerized? Yes Type of Software: Open Dental COMMENTS: Seller on track for almost \$1M this year! Has been mix of associate and owner operated. 3-4 days of									
hygiene and great 2-3 days per week	staff! Excellent pa	atient demograp	hics. Practice e	quipment is no			•		

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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. <u>22 - 586</u>	Location	Brea			
Accepted and Agreed to:					
Signature		Agent			
Print Name		Print Name			
Date		Date			
Address		P. O. Box 8445 Newport Beach, CA 92660 (949) 548-4559			
City	<u> </u>	Any additions or deletions to this page other than information we have			
Phone (Circle One: Mobile/Home/Business))	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