

# DEFERRED PRESENTMENT SERVICES AGREEMENT

This deferred presentment services agreement is entered into between Alpha Omega Consulting Group, Inc., Nashville, TN, and RON W JONES, hereafter "Customer." Alpha Omega Consulting Group, Inc. acknowledges receipt of Customer's check no(s) 123, dated 11/14/2005 in the amount of \$236.00. Customer acknowledges receipt of \$200.00 in cash or check and understands that the additional amount of \$36.00 is the fee charged by Alpha Omega

Alpha Omega Consulting Group, Inc. has disclosed that I am paying a \$36.00 fee for this deferred presentment service. Alpha Omega Consulting Group, Inc. agrees not to deposit my check until the expiration of 14 days which will be Monday, November 28, 2005 (not more than 31 calendar days after the date the check is tendered). I understand that I have the right to redeem my check prior to the agreed upon deposit date above. In order to redeem my check, I understand that payment of the full face amount of the check must be made prior to the close of business on Monday, November 28, 2005 in the form of cash or other certified funds.

## **FEDERAL TRUTH IN LENDING DISCLOSURE**

<b><u>ANNUAL PERCENTAGE RATE</u></b>	<b><u>FINANCE CHARGE</u></b>	<b><u>Amount Financed</u></b>	<b><u>Total of Payments</u></b>
<small>The cost of your credit as a yearly rate.</small>	<small>The dollar amount the credit will cost you.</small>	<small>The amount of credit provided to you or on your behalf.</small>	<small>The amount you will have paid after you have made all payments scheduled</small>
<b><u>469.29%</u></b>	<b><u>\$36.00</u></b>	<b><u>\$200.00</u></b>	<b><u>\$236.00</u></b>

You have the right to receive at this time an itemization of the Amount Financed.  I want an itemization of the Amount Financed.  I do not want an itemization. YOUR PAYMENT SCHEDULE: Number of payments: 1 Amount of payment: \$236.00. Presentment Date: 11/29/2005 (Date check will be deposited ).

I HEREBY CERTIFY THAT I HAVE RECEIVED A COPY OF THIS TRUTH IN LENDING DISCLOSURE PRIOR TO ENTERING INTO THIS DEFERRED PRESENTMENT TRANSACTION

CUSTOMER SIGNATURE: X \_\_\_\_\_

THERE IS NO REBATE OF THE FINANCE CHARGE IF THE CHECK IS PREPAID BEFORE THE PRESENTMENT DATE SHOWN ABOVE.

**\*\*THE FEE AUTHORIZED BY TN STATE LAW, AS SHOWN IN THE FINANCE CHARGE BLANK ABOVE, SHALL NOT BE DEEMED INTEREST FOR ANY PURPOSE OF LAW.**

In the event that my check is returned to Alpha Omega Consulting Group, Inc. from my financial institution due to insufficient funds, closed account, or a stop payment order, I understand that Alpha Omega Consulting Group, Inc. shall have the right to all civil means available and allowed by law to collect the check, including the right to collect court costs and reasonable attorney fees incurred in bringing a civil lawsuit. Further, Alpha Omega Consulting Group, Inc. will assess a returned check charge of \$25.00 in the event a check is returned for any of the above mentioned reasons.

I acknowledge that I have read this agreement, understand its contents, agree to its terms, and have been given, before signing this agreement, a written explanation, in clear, understandable language, of the fees to be charged by Alpha Omega Consulting Group, Inc., and the date on which the check will be deposited or presented by Alpha Omega Consulting Group, Inc.. By my signature below, I hereby certify that this loan combined with any other loans I may have out do not exceed one third of my net monthly income.

*Signed Monday, November 14, 2005*

CUSTOMER SIGNATURE: X \_\_\_\_\_

RON W JONES

Loan No:CA76100R