



T.C. FINANCE COMPANY, INC.
 dba TC CORP.
 25, Greystoke Manor
 Lewes, DE 19958

ADDRESS INQUIRIES AND CORRESPONDENCE TO :
TC CORP c/o Euromarketing SARL
 95 Bld General Leclerc
 F-51100 Reims, FRANCE

TRUTH IN LENDING DISCLOSURE

In this retail installment contract, the words I, me and we mean each person who signed this document as Borrower and Guarantor. The words you and your mean the Creditor, TC Finance Company, Inc. (TC Corp). All amounts are in US Dollar currency.

1. ANNUAL PERCENTAGE the cost of my credit as a yearly rate.	2. FINANCE CHARGE the dollar amount the credit will cost me.	3. AMOUNT FINANCED the amount of credit provided to me or on my behalf.	4. TOTAL OF PAYMENTS the amount I will have paid after having made all payments as scheduled.	5. LOAN DATE January 15, 2008
18.90 %	\$ 3,177.97	\$ 10,000.00	\$13,177.80	My payment schedule will be :
		6. NUMBER OF PAYMENTS 36	7. AMOUNT OF PAYMENTS \$ 366.05	8. PAYMENTS ARE DUE : EACH MONTH END

9. BORROWER - Name, SSN and address

 John D Doe
 2007 Broadway
 Los Angeles, CA 90064
 USA

10. SECURITY. I am giving a security interest in my vehicle :
 Year, Make, Model :
 2008/Harley-Davidson
 FLSF FAT BOY
 VIN# (if available):

EFFECTIVE DATE : Finance charges begin at the beginning of the month of the scheduled delivery date or at the beginning of the month when loan funds are effectively disbursed, whichever comes first.

FIRST INSTALLMENT : My first installment is due at month end of the effective date per above.

RISK CHARGE : Unless I provide TC Corp. with a lienholder's certificate of insurance stating collateral is protected by full coverage insurance properly listing TC Corp. as lienholder, I agree for you to assess a risk charge in the amount \$20.00 per month through loan payoff. Unless I pay this amount separately, I instruct you to deduct this charge from my monthly payments, included in the extended monthly installment below.

LATE CHARGES : If a payment or part thereof is more than 5 days late, you will charge me a \$5.00 late charge.

PREPAYMENT : If I pay off early, you will NOT charge me a penalty. Interest charges are due through the end of the month of payoff.

DISBURSEMENT : TC Corp. is to pay the above mentioned AMOUNT FINANCED directly to the seller.

PROCESSING FEE : A \$75.00 loan processing fee will be charged for all loans funded. I will pay this amount separately before my first installment, I otherwise authorize you to deduct this amount from my first installment.

\$ 386.05 is my **EXTENDED MONTHLY INSTALLMENT AMOUNT** for the above. Pay to TC Corp account no. 0701104830

PROMISSORY NOTE

I promise to pay TC Corp. or the holder of this note the amount financed stated above on the terms and rates stated above.

RESPONSIBILITY. This Promissory Note covers my loan with you. When I sign my name below, I accept the terms of this loan. Anyone else who signs as Guarantor or Borrower also accepts the terms of this loan and will be responsible the same way I am.

PAYMENTS. I will make payments to you as stated above, which will include the amount you loan me, finance charge and other charges until the full amount has been paid. Though I need pay only the amount of the fixed installments, I understand I have the right to repay my loan in full at any time and you will not charge any penalty for pre-payment. I will pay finance charges only to the date I repay my loan. The actual Finance Charge may exceed the disclosed Finance Charge if I make my payments later than the scheduled dates or in less than the scheduled amount. You or I can end this contract anytime before the loan is paid to me. You can accept late payments or partial payments or payments marked "paid in full" without losing your rights under this Note.

SECURITY. I pledge as security for payment the collateral (property) described above, more fully described on Title documents.

DEFAULT. I will be in default if I fail to pay any installment on time or fail to live up to any of my other agreements. Subject to law, if I default on this Note, you can demand immediate payment of the remaining balance due on this Note without giving any notice. You may also use any of your other legal rights. If my payment is five days or more late, I will be charged a late charge of \$5.00. I agree to pay a \$20.00 returned check for each check, draft or other order of payment that is dishonored for any reason not attributable to you.

COLLECTION COSTS. If I am in default under this Note, I agree to pay all costs of collection, including your reasonable attorney's fee and court costs in an amount not more than 25 percent of the principal and finance charge due on this Note, or an amount which is in compliance with the DOD Standards of Fairness if smaller.

GUARANTORS. If I am signing this Note as Guarantor, I agree to be equally responsible with the Borrower. You do not have to notify me that this note has not been paid. You can change the terms of payment and release my security without releasing me from responsibility on this Note.

ENFORCEMENT. You can delay enforcing any of your rights under this Note without losing them. I authorize you to contact my Commander, Supervisor or Employer to obtain any information or assistance necessary to enforce the terms and clauses of this Note and Security Agreement on the reverse side. I further authorize my Commander, Supervisor or Employer to release such information and provide such assistance at any time.

RECEIPT. I have kept a copy of this Disclosure and Note.

I have read the above and accept the terms of this Disclosure and Note.

Date
X DATE HERE

Borrower Signature
X SIGN HERE

X GUARANTOR SIGNATURE
 Guarantor Signature (if applicable)

Please keep a copy of this contract for your records



SECURITY AGREEMENT (FINANCING STATEMENT)

In this Security Agreement, the words I, me, my and we mean each person who signed the Security Agreement as Borrower or Guarantor, even if one or more of the signers is not contractually responsible for repayment of the Promissory Note on the reverse side. You and your mean the Secured Party.

SECURITY INTEREST. I give you a security interest in my property which is described on the reverse side of this Security Agreement. By granting you a security interest in this property, I provide you with security for payment and performance of my duty to you which is described in the Promissory Note on the reverse side.

COLLATERAL. Any of my property covered by your security interest is called "collateral". Any additions and replacements to the property, or any money or property from the sale of the property are also part of the collateral. I am using the money you are lending me to buy the collateral. You therefore have what is called a "purchase money security interest" in the collateral. This gives you more protection against others who might claim the collateral is theirs. You may pay the proceeds of this Note directly to the seller of the collateral.

I agree to help you do all that is necessary to protect your security interest in the collateral.

OWNERSHIP OF THE COLLATERAL. I own the collateral and no one else has any interest in it or claims against it. I agree not to sell, lease, or give it as security to anyone else unless I have obtained your written permission to do so or have repaid the loan in full.

USE OF THE COLLATERAL. While any part of my loan remains unpaid, I promise:

1. To use the collateral carefully and keep it in good repair.
2. To obtain your written permission before making any major alterations.
3. To inform you in writing before changing my address or the address where the collateral is kept.
4. Not to move the collateral to a new address without notifying you and without having obtained your written permission.
5. To help you protect the rights I have given you.
6. Not to use or permit anyone to use the collateral for unlawful purposes.
7. To permit you or your agent to inspect the collateral at reasonable times.

PROPERTY INSURANCE, TAXES. I will keep the collateral insured for liability and against loss by theft ("comprehensive") at all times. At my option, I may keep the collateral insured for its full value against all loss and damage ("full coverage") and provide you with an insurance certificate naming you as lienholder, properly listed at your business address in France when I am granted the loan. Insurance policies must say that you are to be paid what you are owed if there is a loss. I will deliver the policy, or a copy of it to you if you request. If the collateral is lost or damaged, you can use the insurance proceeds to replace or repair it, or to repay any amounts I owe you. If I choose not to insure my collateral for full coverage, I understand that TC Finance Company may charge a risk charge in the amount of \$20.00 per month. If I do not pay for this amount separately, I instruct TC Finance Company to deduct this charge from my monthly installment. I will pay all taxes and fees on the collateral. If I don't, although you are under no obligation to do so, you may pay such taxes or fees and add them to the principal loan balance due on the loan.

PAYMENTS. I must make all payments when they are due. I may prepay my debt at any time without penalty. This is a simple interest contract. The actual finance charge I agree to pay will depend on my actual payment dates and amounts. The actual finance charge may exceed the disclosed Finance Charge if I make my payments later than the scheduled dates or in less than the scheduled amount. My payment will be first applied to any late charges, collection or legal fees, followed by the earned and unpaid part of the Finance Charge and then to the unpaid Amount Financed. The Finance Charge is earned by applying the Annual Percentage Rate to the unpaid Amount Financed for the actual time that the unpaid Amount Financed is outstanding.

ENTIRE BALANCE DUE. I agree that without giving me any advance notice, you can require me to pay the entire unpaid balance of my loan at once if I break any promise made under this Security Agreement.

DEFAULT AND REPOSSESSION. I will be in default:

1. If I don't meet a promise, including making each monthly payment when due.
2. If I break any promise made to in this Agreement, or if you find any representation on my application for credit was not true when made.
3. If I am discharged from the military service prior to repayment of the loan in full.
4. If I become insolvent or file Bankruptcy.
5. If a lien is put on the collateral without your permission, or if the collateral is confiscated.
6. If the collateral is misused, not kept in good repair or in danger of losing too much value.
7. If I do anything that reduces my ability or willingness to pay.
8. If I die or become incompetent.

MONEY ADVANCED. If I fail to do anything I have promised to do in this Agreement, you may do it, and money spent for this purpose shall be added to the principal loan balance due.

TAKING POSSESSION OF THE COLLATERAL. If I am in default, you can take possession of the collateral. I will deliver the collateral to you at a time and place you choose. If I don't, or if you wish, you can take the collateral without giving me advance notice. After you have taken the collateral, You can sell it and apply the proceeds to the unpaid balance of my loan. You will give me 10 days notice of any public sale or the day after which you will be free to have a private sale. I will have to pay the costs you incur in taking and selling the collateral, court costs and reasonable attorney's fees. If the money from the sale is not enough to pay you the unpaid balance of the loan and any interest I owe you, and to reimburse you for these expenses, I still have to pay the difference. I am entitled to any money left over if the money from the sale is more than I owe.

FINANCING STATEMENT. You are authorized to file Financing Statements as required and I will pay the costs.

NO WAIVER. Because you excuse one default does not mean that later defaults will be excused.

EFFECTIVE DATE. This Security Agreement becomes effective on the date shown on the reverse side and when signed by me.

CONSUMER REPORTS. I authorize TC Corp to obtain consumer credit reports from consumer credit reporting agencies (credit bureaus) for any reason and at any time in connection with this account.

I have read this Agreement and received a copy. I understand it contains all my rights and responsibilities. No oral statements can change it. All changes must be approved by you in writing. My heirs and legal representatives will also be responsible under this Agreement.

Date

X DATE HERE

Signature - TC Corp

Borrower Signature

X SIGN HERE

X GUARANTOR SIGNATURE

Guarantor Signature (if applicable)

APPLICANT INFORMATION

1. GENERAL PURCHASE INFORMATION

a. Motorcycle Year/ Brand/ Model Designation 2008/Harley-Davidson FLSF FAT BOY	b. Sales location / Agent name MANNHEIM/Paul Jones	c. Total purchase price (incl. options/accessories) \$17,000.00
d. Estimated delivery date January 15, 2008	e. Delivery location (specify Overseas / US city) Los Angeles, CA 90064	f. Total down-payment amount \$7,000.00

2. APPLICANT INFORMATION - MUST BE COMPLETE (INCLUDING PHONE NUMBERS)

a. NAME (LAST, First, Middle Initial) John D Doe	b. Social Security No. 111-22-3333	c. Date of Birth (YY/MM/DD)
d. Branch (Army, AF, Civilian...)	e. Grade/ Rank	f. ETS date (YY/MM/DD)
g. Unit designation (Employer/ Contractor name for civilians)	h. STATUS (Active, Reserve, Natl Guard, Retired)	i. DEROS (YY/MM/DD)
j. Quarters address <input type="checkbox"/> use as mailing address	m. Home of Record address <input type="checkbox"/> use as mailing address	p. Unit address (work address for civilians)
k. APO/FPO/ City, state Zip	n. City, State, ZIP	q. APO/FPO/ City, state Zip
l. Phone (cell phone)	o. Home phone (with area code)	r. Work phone (non-DSN, country code)
s. Primary e-mail address	t. Alternate e-mail address	

3. REFERENCE INFORMATION - MUST BE COMPLETE (INCLUDING PHONE NUMBERS)

a. SPOUSE (Maiden NAME, First, Initial)	e. RELATIVE NAME (different from home of record)	i. Additional reference NAME (friend, relative)
b. Social Security No.	f. Street Address	j. Street address
c. Employer/ approx. monthly income	g. City, State, ZIP	k. City, State, ZIP
d. Ages of additional dependents	h. Phone no. (with area code)	l. Phone no. (with area code)

4. FINANCIAL INFORMATION

List all debts / installments	Creditor / location	Monthly amount	Balance owing / final payment date
Rent/ mortgage			
Automobile			
Support /Alimony			
Savings			
Other :			
Additional income	Source / Employment	Monthly amount	
Checking account Bank Name / address			

Have you ever filed bankruptcy ? YES NO
 Any pending creditor collection action (collection procedures, bankruptcy in filing) ? YES NO
 Any disciplinary action presently pending or in last 12 months ? YES NO
 I authorize TC Corp to obtain consumer credit reports for evaluation or loan collection purposes. YES

I hereby represent, warrant, and confirm that all foregoing statements on this application are true and have been made by me knowing that T.C. Corp will rely thereon considering the application. I acknowledge that section 1014 of title 18 of the U.S. Code makes it a Federal Crime to make false statements or reports on this loan application. I authorize you to obtain any information you may require relative to this application, from my Commanding Officer, First Sergeant, Employer, and from other sources to which you may apply, each source being authorized by me to provide you such information. I consent to the release to and by you of any credit history and financial information to and by all credit and financial information sources necessary to the consideration of this application. I agree that if any situation arises before this loan is made which materially changes any of the representations herein made by me, I will promptly notify you.

X DATE HERE

 DATE

X SIGN HERE

 SIGNATURE



T.C. Corp c/o Euromarketing SARL
 95, bld General Leclerc
 F-51100 Reims, FRANCE
 email : info@tcfinance.com
 phone : +33 326476952
 fax : +33 326403390

PERSONAL DATA RELEASE AUTHORIZATION STATEMENT OF INTENT TO REENLIST

NAME John D Doe	GRADE/ RANK E4	SSN 111-22-3333
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Under the provisions of Section 552a(b), Public Law 93-579, commonly known as the Privacy Act of 1974, Department of Defense Directive 5400.11, enclosure 5; and the implementing service authority (Par 3-2, APR 340-21, Dept of the Army, 27 August 1975; Section D, Par 15a, AFR 12-35, Dept of the Air-Force, 11 April 1979),

I hereby authorize my Commanding Officer, First Sergeant (for military members) or Supervisor (for civilians) to release the information below in conjunction with my request for credit. I further authorize release of updated information if requested at any time and disclosure of my new address in case of reassignment or separation.

To supplement information provided in my Loan Application and for your consideration in granting me loan terms beyond my present ETS, I hereby certify that:

- | | | |
|--|---|-----------------------------|
| I intend to reenlist for further Military Service as soon as I am able to do so. | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| I am in process of reenlisting, or intend to do so within the next 12 months. | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| I am in process of separating, or intend to do so within the next 12 months. | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

X DATE HERE
DATE

X SIGN HERE
SIGNATURE

PERSONAL DATA VERIFICATION TO BE COMPLETED BY COMMANDING OFFICER OR FIRST SERGEANT, OR SUPERVISOR (FOR CIVILIANS)

1. Present DEROS - rotation date (YY/MM/DD) _____
2. Present ETS - (end of contract if applicable) _____
3. Current enlistment (first, second, ...) _____
4. Is applicant eligible for reenlistment (no bars, ...) ? YES NO
5. Has applicant applied for voluntary separation ? YES NO
6. Any disciplinary, judicial or administrative actions pending
or in last 18 months ? (if YES, explain below) YES NO
7. Any creditor complaints (letters of indebtedness) or requests
for assistance in applicants file ? (if YES, explain below) YES NO

Comments : _____

X DATE HERE
DATE

X SIGNATURE HERE
SIGNATURE OF CO, 1SGT OR SUPERVISOR

Printed NAME, RANK

Phone no.



FIRST STATE BANK TC CORP ACCOUNT APPLICATION AND AGREEMENT

Name (Depositor): John D Doe

TC Account No.: 0701104830

In consideration of the opening and maintenance of an Account by First State Bank, 2002 Broadway, P.O. Box 1267, Scottsbluff, NE 69363-1267 (hereinafter "Bank"), the Depositor agrees to be subject to the Bank's rules, regulations, service charges and by-laws as now in effect or later amended.

Depositor authorizes the Bank to accept checks or electronic transfers of funds on his behalf and requests that these be deposited into the Account of T.C. Finance Co., Inc, to whom the depositor is indebted. Depositor understands that T.C. Finance Co., Inc., not the Bank, is the lender. The Bank is the financial institution transferring these funds at depositor's instructions.

This deposit / transfer authorization to T.C. Finance Co., Inc. is to remain in effect until the undersigned gives the Bank a stop / change notice. Such notice must be received by bank : (1) in writing at least 3 days before a transfer date, or (2) telephonically to (308) 632-4158, at least 14 days before a transfer date.

Date

X DATE HERE

Borrower Signature

X SIGN HERE

X GUARANTOR SIGNATURE

Guarantor Signature (if applicable)



CREDIT REPORT INFORMATION REQUEST AND RELEASE AUTHORIZATION

Name : John D Doe

SSN : 111-22-3333

I authorize TC Corp to obtain consumer credit reports from consumer credit reporting agencies (credit bureaus) for any reason and at any time in connection with this loan. I consent to the release of any credit history and financial information to and by TC Finance Company or its designated agent in conjunction with my loan.

Date

X DATE HERE

Borrower Signature

X SIGN HERE

ALSO APPLIES TO GUARANTOR.

X GUARANTOR SIGNATURE

Guarantor Signature (if applicable)

AGREEMENT FOR PRE-AUTHORIZED DEBITS

This agreement authorizes TC Corp to transfer funds to and from your Bank account. Your acceptance is required to simplify making your monthly payments (if you cannot pay by allotment), extra payments (to prepay your loan), to make up for late payments (allotment misprocessed), or to refund overpayments to your account. TC Corp will not process any transfers from your account without your authorization.

Please ensure all information is complete and correct. We recommend that you contact your bank for assistance if necessary. Please complete, date, sign, and return with a voided check from your account.

DEPOSITORY INSTITUTION (MY BANK INFORMATION)

Bank Name
Address
City, State, ZIP
Routing/ ABA No. (9 Digits)
Account No.
Account Name (both names if joint account)
Account Type (select) <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS

DEPOSITORY INSTITUTION (TC CORP BANK INFORMATION)

Bank Name FIRST STATE BANK
Address 2002 Broadway
City, State, ZIP Scottsbluff, NE 69363
Routing/ ABA No. (9 Digits) 1 0 4 1 1 3 3 4 3
Account No. 7 1 1 9 2 8 2
Account Name TC FINANCE CO.
Account Type CHECKING

The words I and my means each person who signs this document (thus meaning we and our for joint account holders). By signing this document in conjunction with my TC Corp loan, I authorize TC Corp and First State Bank to initiate debit entries (draft payments) or credit entries (refunds) on my above Account for TC Corp loan payments. I further instruct TC Corp and First State Bank to credit debit entry transactions from my Account mentioned above for the benefit of TC Corp per TC Corp Bank account information above. I may instruct TC Corp to initiate debit entries from my account by request to an authorized TC Corp representative by phone, fax, or e-mail, upon 24 hour notification. In the event an authorized draft payment request is rejected by my Bank, I authorize TC Corp to reprocess the draft payment request within 5 working days, increased by a \$15.00 processing charge if the draft was rejected due to insufficient funds. **TC Corp shall not initiate draft payment entries without my authorization.**

If I am not paying by allotment, or another form of automatic monthly payment, or if my allotment is discontinued, and if my TC Corp loan account is more than 30 days past-due, I authorize TC Corp to process monthly debit entries (draft payments) from my above Account per the Specific Monthly Transaction information below, unless I expressly instruct otherwise.

SPECIFIC MONTHLY TRANSACTION INFORMATION (if no allotment payments are set up) :

Transaction date (please select)	<input checked="" type="checkbox"/> 3RD OF EACH MONTH (or following working day) OR <input type="checkbox"/> 17TH OF EACH MONTH (or following working day)
Transaction frequency	MONTHLY THROUGH PAYOFF
Transaction amount	\$ 386.05
Transaction Reference	TC CORP / LOAN PAYMENT

This authority is to remain in full force and effect until TC Corp and/or First State Bank has received written notification from me of its termination in such time and in such manner as to afford TC Corp a reasonable opportunity to act on it. I agree that your rights in respect to this transaction will be the same as if it were a check drawn on my account and signed personally by me. I agree that any reasonable transfer fees will be at my expense and may be charged against my account with TC Corp.

X **DATE HERE**

 DATE

Mailing address

X **SIGN HERE**

 SIGNATURE

Phone no : ()

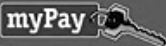
 email :

I attach a VOIDED CHECK from the account for verification purposes

ALLOTMENT START CONFIRMATION

If you are active military or are authorized to start an allotment (MyPay or Direct Deposit), you are to provide proof of the allotment start confirmation with your loan package. Otherwise, payments will be deducted from your bank account as per information provided on Pre-Authorized debit form. Allotment start should be processed at least 21 days prior to scheduled date of delivery.

Sample MyPay Financial Allotment Confirmation :




Financial Allotment Confirmation

This action will be reflected in your October 15, 2005 pay.

If you are receiving mid-month and end-of-month pay and your transaction occurs after mid-month processing, the entire monthly allotment deduction amount will be reflected in your end-of-month pay. If you process prior to mid-month processing, the entire monthly allotment deduction amount would be divided approximately in half and reflected in both your mid-month and end-of-month pay. Please be aware of your current net pay and the impact this transaction will have on your net pay prior to submission to avoid any adverse effect on your pay. The next update will be for October mid-month.

Financial Institution:	* FIRST STATE BANK 2002 BROADWAY SCOTTSBLUFF, NE 69361-0000
Account Number:	* 7119282
Account Type:	* Checking
Monthly Amount:	* \$ (monthly amount)

To confirm, press YES. To cancel, Press NO.



Important : If you are not able to save/print the confirmation above when processing your allotment start, you will need to wait 24 hours before confirmation will be available within the MyPay options. You may forward this confirmation separately by email.