32 Rancho Circle, Lake Forest, CA 92630 U.S.A. • P: 949.216.9600 • F: 949.216.9601 • LifePharmGlobal.com • CustomerService@LifePharmGlobal.com

LIFEPHARM INDEPENDENT BUSINESS OWNER APPLICATION & AGREEMENT (U.S.A.)

DETAILS	CV	PRICE (USD)	QTY	TOTA
16 Laminine (30-count) boxes, 16 OMEGA *** (30-count) boxes, 12 DIGESTIVE *** (30-count) boxes, 12 IMMUNE*** (30-count) boxes	1000	\$1400		
17 OMEGA*** (30-count) boxes, 25 Laminine (30-count) boxes + 3 OMEGA*** (30-count) boxes and 5 Laminine (30-count) boxes FREE	250	\$1399		
9 Laminine (120-count) boxes, 20 Laminine brochures, + 1 Laminine (120-count) box FREE	200	\$1199		
36 Laminine (30-count) boxes + 4 Laminine (30-count) boxes FREE	200	\$1199		
18 Laminine (30-count) boxes + 2 Laminine (30-count) boxes FREE	200	\$1199		
8 Laminine (30-count) boxes, 4 OMEGA*** (30-count) boxes, 4 DIGESTIVE*** (30-count) boxes, 4 IMMUNE*** (30-count) boxes	400	\$538		
4 Laminine (30-count) boxes, 2 OMEGA *** (30-count) boxes, 2 DIGESTIVE *** (30-count) boxes, 2 IMMUNE*** (30-count) boxes	250	\$310		
9 Laminine (30-count) boxes + 1 Laminine (30-count) box FREE	234	\$299		
9 OMEGA*** (30-count) boxes + 1 OMEGA*** (30-count) box FREE	234	\$299		
9 DIGESTIVE*** (30-count) boxes + 1 DIGESTIVE*** (30-count) box FREE	207	\$261		
9 IMMUNE*** (30-count) boxes + 1 IMMUNE*** (30-count) box FREE	207	\$261		
1 Laminine (30-count) box, 1 OMEGA*** (30-count) box, 1 DIGESTIVE*** (30-count) box, 1 IMMUNE*** (30-count) box		\$124		
3 Laminine (30-count) boxes	78	\$99		
3 OMEGA*** (30-count) boxes	78	\$99		
1 Laminine (30-count) box	26	\$33		
1 Laminine (120-count) box	104	\$132		
1 OMEGA+++ (30-count) box	26	\$33		
1 DIGESTIVE*** (30-count) box	23	\$29		
1 IMMUNE*** (30-count) box	23	\$29		
90-Day subscription to the LifePharm Level 100 VIP training platform FREE, Replicated LifePharm Website and LifePharm Virtual Office	N/A	\$29.95		
	16 Laminine (30-count) boxes, 16 OMEGA *** (30-count) boxes, 12 DIGESTIVE *** (30-count) boxes, 12 IMMUNE*** (30-count) boxes, 25 Laminine (30-count) boxes + 3 OMEGA*** (30-count) boxes and 5 Laminine (30-count) boxes, 26 Laminine brochures, + 1 Laminine (120-count) box FREE 9 Laminine (120-count) boxes, 20 Laminine brochures, + 1 Laminine (120-count) box FREE 36 Laminine (30-count) boxes + 4 Laminine (30-count) boxes FREE 18 Laminine (30-count) boxes + 2 Laminine (30-count) boxes FREE 8 Laminine (30-count) boxes, 4 OMEGA *** (30-count) boxes, 4 DIGESTIVE *** (30-count) boxes, 4 IMMUNE*** (30-count) boxes, 2 OMEGA *** (30-count) boxes, 2 DIGESTIVE *** (30-count) boxes, 2 IMMUNE*** (30-count) boxes + 1 Laminine (30-count) box FREE 9 OMEGA*** (30-count) boxes + 1 OMEGA*** (30-count) box FREE 9 DIGESTIVE*** (30-count) boxes + 1 DIGESTIVE*** (30-count) box FREE 9 IMMUNE*** (30-count) boxes + 1 IMMUNE*** (30-count) box FREE 1 Laminine (30-count) box 1 OMEGA*** (30-count) box, 1 DIGESTIVE*** (30-count) box, 1 IMMUNE*** (30-count) box 1 Laminine (30-count) boxes 1 Laminine (30-count) box 1 Laminine (30-count) box	16 Laminine (30-count) boxes, 16 OMEGA *** (30-count) boxes, 12 DIGESTIVE *** (30-count) boxes, 12 IMMUNE*** (30-count) boxes, 12 IMMUNE*** (30-count) boxes, 25 Laminine (30-count) boxes + 3 OMEGA*** (30-count) boxes and 5 Laminine (30-count) boxes FREE 200 36 Laminine (30-count) boxes, 20 Laminine boxes, 21 Laminine (120-count) box FREE 200 18 Laminine (30-count) boxes + 4 Laminine (30-count) boxes FREE 200 8 Laminine (30-count) boxes, 4 OMEGA*** (30-count) boxes FREE 200 8 Laminine (30-count) boxes, 4 OMEGA*** (30-count) boxes, 4 DIGESTIVE*** (30-count) boxes, 4 IMMUNE*** (30-count) boxes, 4 DIGESTIVE*** (30-count) boxes, 2 IMMUNE*** (30-count) boxes, 2 DIGESTIVE*** (30-count) boxes, 2 IMMUNE*** (30-count) boxes, 2 DIGESTIVE*** (30-count) box, 2 DIGESTIVE*** (30-count) box, 3 DIGESTIVE*** (30-count) box, 1 DIGESTIVE*** (30-count) box, 2 DIGESTIVE*** (30-count) boxes, 2 DIGESTIVE*** (30-count) box, 3 DIGESTIVE*** (30-count) boxes, 2 DIGESTIVE*** (30-count) boxes, 2 DIGESTIVE*** (30-count) box, 3 DI	16 Laminine (30-count) boxes, 16 OMEGA *** (30-count) boxes, 12 DIGESTIVE *** (30-count) boxes, 12 IMMUNE*** (30-count) boxes, 25 Laminine (30-count) boxes + 3 OMEGA*** (30-count) boxes 250 \$1399	16 Laminine (30-count) boxes, 16 OMEGA*** (30-count) boxes, 12 DIGESTIVE*** (30-count) boxes, 1000 \$1400 17 OMEGA*** (30-count) boxes, 25 Laminine (30-count) boxes + 3 OMEGA*** (30-count) boxes FREE 250 \$1399 9 Laminine (30-count) boxes, 20 Laminine brochures, +1 Laminine (120-count) box FREE 200 \$1199 36 Laminine (30-count) boxes + 4 Laminine (30-count) boxes FREE 200 \$1199 18 Laminine (30-count) boxes + 2 Laminine (30-count) boxes FREE 200 \$1199 18 Laminine (30-count) boxes, 4 OMEGA*** (30-count) boxes, 4 DIGESTIVE*** (30-count) boxes, 4 Laminine (30-count) boxes, 2 DIGESTIVE*** (30-count) boxes, 4 Laminine (30-count) boxes, 2 DIGESTIVE*** (30-count) boxes, 2 Laminine (30-count) boxes, 2 DIGESTIVE*** (30-count) box, 2 DIGESTIVE*** (30-count) box, 3 DIGESTIVE*** (30-count) box, 1 DIGESTIVE*** (30-count) box, 2 DIGESTIVE*** (30-count) box, 2 DIGESTIVE**** (30-count) box, 2 DIGESTIVE**** (30-count) box, 2 DIGESTIVE***** (30-count) box, 2 DI

Shipping & handling, applicable tax will be added.

		*Business Succe	ess Starter Kıt ınclu	uded when signing up with a	n Activation Pack or above.	lotal:
APPLICANT INFORMATION				Complete if	:II: L:	
Information with an asterisk (*) is recareas, shipping of product will be place				Business	enrolling as a busine	ess entity:
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SSN++:	DOB: MM			EIN:		
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**IBOs who do not provide SSN will not be perr		ithdrawals from their eW	allet or request for i	issuance of a check until such in	nformation is provided in writin	ng.
CO-APPLICANT INFORMATION						
*First Name:	*Last Name:		SSN++:		DOB: MM/	DD/YYYY
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VIRTUAL OFFICE INFORMAT	ION					
Please note, if usernames are not avail spaces or special characters. Usernam	able, username will d ne allows access to yo	efault to your first an ur Virtual Office and	d last name. Us can be change	ername must be a minimu d after login. Your websi	um of eight (8) letters and te URL will bewww.MyLif	numbers only, no ePharm.com/(username
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SPONSOR INFORMATION			PLACE	MENT INFORMATIC	Chec	k if Auto Placement
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*Credit Card #:		*Exp Date: N	LALINOVI L	Authorized Signature certify this signature is of the card or credit card for the order indica		

LIFEPHARM INDEPENDENT BUSINESS OWNER APPLICATION & AGREEMENT (U.S.A.)

OPTIONAL AUTO-DELIVERY SETUP

You may elect at this time to enroll in the LifePharm Optional Auto-Delivery program. If you would like to register to participate in this program, you may do so at this time by indicating the product selection that you would like to automatically receive on a monthly basis by providing us with your credit card information for payment of your Auto-Delivery orders. Participation in the Auto-Delivery program is completely optional and is not required to become an Independent Business Owner (IBO) or to remain as an IBO.

If you elect to participate in the Auto-Delivery program, your credit card will not be charged until your Auto-Delivery order processes on the day specified for each month. A one-time Address Verification System (AVS) pending transaction of \$1 to validate and authorize your billing information may appear on your account. This transaction is for authorization purposes only and you will not be billed for this charge. Thereafter, your credit card will be charged on or about the same day each month for your monthly Auto-Delivery order. Sales tax, shipping and handling will be added based upon the address that you provide below.

ITEM	DETAILS	CV	PRICE (USD)	TOTAL
Laminine Family Pack	9 Laminine (30-count) boxes, + 1 Laminine (30-count) box FREE	234	\$299	
OMEGA*** Family Pack	9 OMEGA*** (30-count) boxes, + 1 OMEGA*** (30-count) box FREE	234	\$299	
DIGESTIVE*** Family Pack	9 DIGESTIVE*** (30-count) boxes, + 1 DIGESTIVE*** (30-count) box FREE	207	\$261	
IMMUNE*** Family Pack	9 IMMUNE*** (30-count) boxes, + 1 IMMUNE*** (30-count) box FREE	207	\$261	
Director Auto-Delivery Pack	2 Laminine (30-count) boxes, 2 OMEGA*** (30-count) boxes	104	\$132	
Classic AD Advantage Pack	3 Laminine (30-count) boxes, 1 OMEGA+++ (30-count) box	80	\$120	
Essential AD Advantage Pack	1 Laminine (30-count) box, 1 OMEGA***(30-count) box, 1 DIGESTIVE***(30-count) box, 1 IMMUNE***(30-count) box	80	\$120	
Eco AD Advantage Pack	1 Laminine (120-count) Eco bottle	80	\$120	
Laminine®	1 Laminine (30-count) box	26	\$33	
	1 Laminine (120-count) bottle	104	\$132	
OMEGA***	1 OMEGA*** (30-count) box	26	\$33	
DIGESTIVE***	1 DIGESTIVE*** (30-count) box	23	\$29	
IMMUNE***	1 IMMUNE*** (30-count) box	23	\$29	

Shipping & handling, applicable tax will be added.

Price	
Total:	

AUTO-DFII	VFRY PROGRAM	M BILLING AND	SHIPPING INFORMATION

AUTO-DELIVERT	PROGRAMI DIL	LING AIND SE		FORMATION	
In order for LifePharm to pr	ocess your request, you	must authorize this	Auto-Delivery tra	insaction by submitting your information in the spaces provide	ded and signing below
	☐ MASTER CARD E AS PAYMENT INFOI		☐ AMEX	I authorize LifePharm to charge my credit card for the total amount due ea or delivered by LifePharm. In making this authorization, I acknowledge tha agree to all Terms and Conditions of Authorization and Disclosures provic	t I have read, understood and
*Name on Card:		*		agree to an remarkable entire and contained by tender and a state of the province	*Initials:
*Credit Card #:		Do	xp. MM/YYYY	TERMS AND CONDITIONS OF AUTHORIZATION AND DISCLOSURES	
*Billing Address:		*7*.		Authorization - By reviewing and completing the Auto-Delivery Agreen same as if it were an order form personally signed by you. Note information, please verify that the name you enter on the form is the	e: To ensure accurate orde
*City:	*State:	*Zip Code:	Country: U.S.A.	institutions statement. Disclosures - With this agreement, you are electing to provide your at	uthorization for Auto-Deliven
*Shipping Address:			,	(reoccuring order) and consent to the receipt of confirmation of your a required for any payment in electronic form. Upon notice to LifePharm, consent to the receipt of electronic confirmations and notifications receipts.	uthorization and any notices you may also withdraw you
*City:	*State:	*Zip Code:	Country: U.S.A.	allowing sufficient time for processing the change. You may also wi conditions of this authorization, which may result in termination or mod LifePharm.	ithdraw your consent to any
				Revocation - The agreement will remain in effect until revoked by eith financial institution. IBOs must notify LifePharm to discontinue the Auto-Defor processing.	
*Authorized Signature I certify this signature is of the cardle card for the order indicated on this	nolder named herein. Cardho Application and Agreement.	older authorizes LifePharm	to charge my credit	Stop Payment - You have the right to stop payment of a charge by timely institution prior to your card being charged for your Auto-Delivery order	
TERMS AND CO	NDITIONS				
	am Agreement and agre	ee to abide by all tram	ns set forth in these	ion and Agreement, LifePharm Policies and Procedures, LifePh e documents. I understand that I have the right to terminate my	
have not been an LifePharm	IBO, or a partner, shar	éholder, or principal (of any entity havii	umber (NIP) entered is my correct taxpayer identification numb ng an LifePharm business within the past six months. I underst v result in action by LifePharm, up to and including termination	and that any intentional
		DD/N	M/YYYY		DD/MM/YYYY
*Applicant Signature		*Date		Co-Applicant Signature	Date

Corporations, LLCs, Partnerships, Trusts or Assumed Names -- If your business will be owned or operated by a Corporation, Limited Liability Company (LLC), Partnership, Trust or Assumed Name (example: XYZ Enterprises or John Smith and Associates), you must provide legal information and documentation for said Company and submit the documents with this Application and Agreement form.

Information with an asterisk (*) is required. If any information is not entered in required areas, member enrollment and shipping of product will be placed on hold until such information is received.

The following countries are part of the LifePharm Global Network NFR countries: Australia, Canada, New Zealand, Ghana, Ukraine, Austria, Belgium, Bulgaria, Croatia, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Portugal, Romania, Slovakia, Spain, and Sweden. NFR stands for Not For Resale, and means that product shipped to any location designated as NFR is to be used by the purchaser for PERSONAL USE only and should not be resold to others. The NFR program allows consumers to sign up as members, purchase products, refer others to the program and receive commissions. Even though you may not sell to retail customers in any of the NFR countries, you may sign up others to become members so that anyone can build their business on a global level. Not all LifePharm products are available for purchase in all countries in which LifePharm is open as NFR or otherwise.

- 1. I am of legal age in my state of residency. I understand that as a LifePharm Independent Business Owner (IBO), I may cancel this agreement at any time regardless of reason by written or electronic notice to LifePharm. I also understand that my acceptance as an LifePharm IBO is not automatic, but is subject to the receipt and acceptance of my IBO application by LifePharm at its home office in Orange County, California.
- 2. I certify, under penalties of perjury, that the Social Security Number (SSN) or Federal Tax ID number (NIP), if applicable, on this IBO Application and Agreement is my correct taxpayer identification number. I agree that I am an IBO responsible for determining my own time expended on business activities without control or direction from LifePharm. I am not an agent, employee or legal representative of the Company and I am responsible for the payment of all federal and state self-employment taxes, and other taxes required by any federal, state or taxing agency.

Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt or custody of the income of which I am the beneficial owner, or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner.

- 3. I agree that as an IBO I shall place primary emphasis upon selling and distributing LifePharm products to non-IBO consumers and that I will sell or distribute over 70% of my wholesale product purchases from LifePharm to non-IBO consumers as a condition of my right to receive commissions. I will retain records of my product sales and distributions. My ordering of additional wholesale products from LifePharm constitutes my certification to LifePharm that I have complied with the foregoing requirement by selling or distributing over 70% of my prior wholesale product orders to non-IBOs prior to making each of my subsequent wholesale purchases from LifePharm. Each product re-order certifies to LifePharm that the required product sale to non-IBOs has occurred. IBO shall maintain records of their retail sales to non-IBO consumers and provide these records to LifePharm upon request.
- 4. I will not make any false or misleading or disparaging statements about LifePharm, the LifePharm IBO position, LifePharm products, LifePharm earning opportunities, LifePharm personnel, customers or other IBOs.
- 5. I will not use the Company name, or the Company trade names, logos, sales materials, company literature, trademarks, any websites or service marks of LifePharm except in materials provided by the Company or approved in writing by LifePharm prior to their use by me. I understand that unauthorized use or duplication of trade names, trademarks and copyrighted materials is a violation of federal law.
- 6. LifePharm is the owner of numerous names, marks and trademarks, including but not limited to "LifePharm", "Laminine", "LifePharm Global Network" and other names and marks of LifePharm which are exclusively owned by LifePharm or its affiliates and that IBOs have no ownership or use or interest therein by virtue of this agreement or otherwise. LifePharm hereby grants a limited license to IBO to use the names, marks and trademarks of LifePharm, subject to the Terms and Conditions of this agreement. IBO recognizes the value of the goodwill LifePharm has created with its names, marks and trademarks and acknowledges that the names, marks and trademarks of LifePharm or its affiliates and all rights therein and goodwill pertaining thereto belong exclusively to LifePharm.
- 7. If I am found to be spamming in connection with my activities as an IBO, my business relationship with LifePharm will be terminated immediately and no future commissions will be paid to me. LifePharm reserves the right to impose disciplinary action, including termination of IBO status in appropriate situations in LifePharms sole discretion based upon violation of these Terms and Conditions by any one or more person within the household of an IBO.
- 8. In order to maintain a viable marketing program and to comply with federal, state and local laws and economic conditions, LifePharm may provide additional Terms and Conditions to this agreement from time to time, as well as to modify the LifePharm Compensation Plan and the LifePharm Policies and Procedures. Such additions and modifications shall become a binding part of this agreement upon publication on the official LifePharm website. I understand that no attorney general or other regulatory authority ever reviews, endorses or approves any product, Compensation Plan or company, and I will make no such claims regarding LifePharm.

IBO shall not create, sell or utilize any promotional materials or website referring to LifePharm, its LifePharm Compensation Plan or products except those provided by the Company.

9. I have carefully read and agree to comply with these LifePharm Terms and Conditions, the LifePharm Compensation Plan and the LifePharm Policies and Procedures which are,

together with all future modifications thereto, incorporated herein by reference as if fully set forth herein. I understand that I must be in good standing and not in violation of these Terms and Conditions, to be eligible for participation in the LifePharm Compensation Plan. The continuation of my IBO business or my acceptance of commissions shall each constitute my acceptance of all amendments.

- 10. I acknowledge that no representations or guarantees have been made to me by LifePharm, its officers, IBOs or any representative of the Company concerning how much money I will earn as an IBO.
- 11. I understand that my IBO position may be inherited or bequeathed and may be transferred or assigned during my lifetime upon the prior written consent of LifePharm and upon the Terms and Conditions set by LifePharm, which consent shall not be unreasonably withheld. I agree to obtain all governmental licenses and permits applicable to my business activities as an IBO. I agree to abide by all local, state and federal laws that apply to my LifePharm IBO business and my marketing of LifePharm products.
- 12. LifePharm is responsible for the following fulfillment to IBO: Fulfillment of IBO and customer product orders and the payment of IBO commissions, bonuses and overrides. No credit purchases or CODs are available. IBO agrees to sponsor other IBOs and to sell LifePharm products only in the United States and elsewhere as LifePharm may permit from time to time.
- 13. Change of original sponsor is not permitted. IBO and customer lists and all data and information concerning LifePharm IBOs and customers are owned by the Company and may never be used by IBO for any purpose whatsoever without the prior written consent of the Company. During the term of this agreement and for six (6) months thereafter, IBO shall ndirectly or indirectly, solicit LifePharm IBOs or customers to other business opportunities and/or organizations, nor attempt to sell LifePharm IBOs and customers any products whatsoever, competitive or otherwise, nor to provide any names or contacts for the same or similar reasons to a third party.
- 14. This agreement is governed under the laws of the State of California. The parties agree that all claims, disputes and differences arising between them under this agreement shall be exclusively resolved by binding arbitration pursuant to the Commercial Arbitration Rules of the American Arbitration Association with arbitration to occur at Orange County, California. The arbitrator may award, in addition to declaratory relief, contract damages and may also award consequential damages in the event of a breach of any provisions of sections 4, 5, 6 and 13 of this agreement and shall award reasonable costs and attorney fees to the prevailing party. An arbitration award may be enforced in any court of competent jurisdiction. This provision shall not preclude either LifePharm or IBO from seeking temporary or permanent injunctive relief in any court of competent jurisdiction.
- 15. I understand that if I fail to comply with the terms of this agreement, LifePharm may impose upon me disciplinary action(s) as it determines in its sole discretion.
- 16. I agree to indemnify and hold LifePharm harmless from my actions and omissions that fall outside of my relationship to LifePharm, as well as those that are in violation of this agreement, including LifePharms attorney fees and costs.
- 17. IBO may return literature and wholesale products purchased from LifePharm within 30 (thirty) days of purchase if returned to LifePharm in resalable condition. IBO may obtain a refund of the purchase price less shipping and handling subject to a ten percent restocking fee. Shipping costs for returned items shall be borne by IBO. Payment of refunds will be made within thirty days of actual receipt of returned items. Sales materials and services delivered by internet methods are not capable of being returned to LifePharm and are not subject to refund. LifePharm will honor refund requirements at variance with this paragraph as specified by state or federal law. If the products being returned are part of a package (including any event specials) that included free products, then the number of free products for the package will be first deducted from the number of items being returned and the remaining number of items will be refunded on a pro-rata basis, subject to 10% restocking fee.
- 18. This agreement in its current form and as amended by LifePharm at its discretion constitutes the entire contract between LifePharm and IBO. Any implied promises, representations, offers or other communications not expressly set forth or incorporated by reference to this agreement are of no force or effect. If any provision of this agreement shall be declared invalid by the adjudicator of the law, the remaining provisions shall remain in force and effect and the language of the offending provision shall be reformed only to the extent necessary to ensure its enforceability.
- 19. If IBO wishes to bring an action against LifePharm for any act or omission relating to or arising from this agreement, such action must be brought within one year from the date of the alleged conduct giving rise to the cause of action. Failure to bring such action within such time shall bar all claims against LifePharm for such act or omission. IBO waives all claims permissible by any other applicable statutes of limitation.
- 20. IBO authorizes LifePharm to use the IBOs name, photograph, personal story and/or likeness in advertising or for promotional materials and hereby waives all claims for remuneration for such use. An IBO may cancel this authorization at any time by contacting LifePharm by written letter sent by way of US First Class mail.