CONFIDENTIAL DOCUMENT

Frieda Marroquin, a franchised Chick-fil-A Operator Eldorado & Tollway FSU | Lebanon & Tollway FSU 5211 Eldorado Pkwy | 5377 Dallas Parkway Tel: (214) 387-9887 | Tel: (214) 705-1887

SIGNATURE ON FILE AND CREDIT CARD BILLING AUTHORIZATION FORM

CARD TYPE CARDHOLDER

| NAME AS WRITTEN ON CARD | |
|--------------------------------|---------------------|
| COMPANY NAME IF CORPORATE CARD | |
| CREDIT CARD NUMBER | EXPIRATION DATE |
| PHONE NUMBER OF CARDHOLDER | EMAIL OF CARDHOLDER |
| | |

This Signature on File Credit Card Billing Authorization Form (the "Authorization Form") is provided to Frieda Marroquin, the franchised Chick-fil-A Operator at Eldorado & Tollway FSU and Lebanon & Tollway FSU (the "Operator") upon the request of and as a convenience to the cardholder. The cardholder acknowledges that the charges submitted pursuant to this Authorization Form will not bear the cardholder's signature or an imprint of the credit card. To the extent any charges are authorized to be charged to the credit card listed above but are declined or subsequently rejected, the cardholder agrees to make restitution for such charges upon request from the Operator.

The El Dorado & Toll Road FSR business operated by Operator is an independently owned and operated franchised business. By executing and delivering this Authorization Form, the undersigned cardholder hereby authorizes Operator, and Operator's credit card processing agents, to collect and process the above credit card information on this Authorization Form for consumer products and services rendered by Operator pursuant to a telephone order.

SIGNATURE OF CARDHOLDER DATE OF SIGNATURE

PRINTED NAME OF CARDHOLDER

Privacy Statement for Signature on File Customers

Operator offers customers interested in the convenience of placing orders by telephone an opportunity to complete this "Signature on File" form authorizing Operator, and Operator's credit card processing agents, to charge the cardholder's credit card without the necessity of an additional signature for each transaction. This Authorization Form is offered entirely as a convenience to the undersigned cardholder and is not required.

Operator, and Operator's credit card processing agents will store all credit card information received from cardholders in a secure and private environment and will not knowingly disclose such information to any third party without the written consent of the cardholder other than as required to process payment or to comply with law.

Operator, and Operator's credit card processing agents will only use the credit card information provided as is necessary to complete the transactions requested by the cardholder.

Cardholder may revoke the authorization contained in this Authorization Form at any time by providing Operator with written request thereof at the address set forth above.

Updated: 11/2/2022