for membership in the dealer network of the Certified Collectibles Group Companies.



Thank you for your interest in becoming an Authorized Dealer with the Certified Collectibles Group, LLC ("CCG"), a global leader in expert, impartial and tech-enabled services that add value and liquidity to collectibles. Authorized Dealers receive the most exclusive benefits available from CCG, including grading discounts, full access to an array of digital tools designed to support you and your customers, a listing in the Dealer Locator and much more.

CCG Authorized Dealers pay just \$199 per year to access these and other benefits. Authorized Dealer membership renews automatically each year unless it is cancelled. Membership fees are due upon notification that your application has been approved. If your application is not approved, you do not have to pay any fees.

The CCG Companies include the following:

- Provenance NGC, LLC d/b/a Numismatic Guaranty Company ("NGC")
- Numismatic Conservation Services, LLC ("NCS")
- Paper Money Guaranty, LLC ("PMG")
- Certified Guaranty Company, LLC ("CGC")
- Authenticated Stamp Guaranty, LLC ("ASG")

Membership terms with each of the above companies will be governed by the Dealer Member Terms & Conditions.

The CCG Companies do not necessarily provide services at every CCG location. For more information on the availability of CCG services, visit collectiblesgroup.com To apply for CCG Authorized Dealer membership, please completely read and follow these steps:

- 1. Fill out all pages of the Application Form & Agreement.
- 2. Sign to indicate your agreement with and acceptance of the applicable Terms and Conditions.
- 3. Forward an electronic copy (e.g. scan) of the signed and completed Dealer Application by email to dealerapp@collectiblesgroup.com or by fax to 941-360-2553.

After receipt and review of your application, you will be informed by email whether your application has been accepted. If your application is accepted, you will subsequently receive additional information and documentation. You will also be required to pay your membership fee to complete the activation of your CCG Authorized Dealer membership.

Application Form Please type or print le	?gibly.
Company name:	Contact person:
Street address:	
City:	State: Postal Code / ZIP:
Country:	Phone:
Email:	
Website:	
Federal Tax ID (Required)	and Business Reg. No. (Required)
Preferred Language:	
☐ If you're interested in multiple CCG Companies and wish to p additional information. Please be specific as to which addres	provide different addresses and / or contacts for each, please use the back of this page to provides / contact should be used for each CCG Company.
I am currently a Collector Member: Yes No CS#	
Are you currently or have you ever been a CCG Authorized Deale	r? □ Yes □ No
Have you applied for membership before? ☐ Yes ☐ No	











for membership in the dealer network of the Certified Collectibles Group Companies.



Application Form (continued)

	ne following collectibles d and any official capacities you h				
I am an authorized	dealer for the following (grading services:			
My business is:	☐ A sole proprietorshi)	OLLE	CTIBL	
	☐ A partnership consis	ting of myself and	Terrinin.		
	☐ A corporation of wh	ch I am one of the ma	jor stockholders. The	e others are:	
	☐ A limited liability co	npany, of which I am a	a member. The other	s are:	
Date established: _	1 1 11	8 /		/ \ <u>[</u>]	
The current net wo	rth of my collectibles bus	- iness is: □ Under \$5	50,000 USD 1–\$499,999 USD	□ \$50,000-\$249,999 USD □ \$500,000+ USD	
The majority of my	customers are:	☐ Other dealers	□ Collectors	☐ Both:	
What period of coll	ectibles do you sell?	□ Modern	□ Vintage	☐ Both:	
My primary area of	focus within our collecti	ole category is:	minne.	Specify percentages	
			My website □ Or	lline retailers (e.g., eBay) 🔲 Mail orde	or .
iviy primary sales ci					
				1 Wand of manth	
I use the following	to promote my products:				
		☐ Social media (spe	cify platform — Facebook, F	interest, etc.)	
		☐ Print advertising	(specify publications)		
		□ Other			
•	ng public submissions to about CCG Companies?	CCG Companies?		□ Yes □ No	

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for membership in the dealer network of the Certified Collectibles Group Companies.



Application Form (continued)

Services Terms and Conditions: ngccoin.com. Privacy Policy: ngccoin.com/privacy	/terms	
 Terms and Conditions of Dealer Membership NGC, PMG, CGC and ASG Submission Forms 	: ngccoin.com/dealers/terms-and-conditions	
This Dealer Application Form, together with the Authorized Dealer and the relevant CCG Compa	e below-listed documents (which are hereby incorpo anies, and may only be amended or modified by pro	orated by reference), constitutes the entire agreement between viding fifteen (15) days' written notice to Authorized Dealer.
Payment for CCG's services is due at the tin Application & Agreement.	ne of submission. If you would like to apply for cred	dit terms, you must complete and submit the CCG Credit
	or application proof of ownership for the company li return. This application must be signed by the owner	sted on page one. Acceptable proof includes a copy of the rof the company or their authorized representative.
		7 7
Yes NO (If yes, please provide complete details, inc	cluding date, location (city and state), name of court, and disposition. Use a	n additional piece of paper if necessary.)
allegation of dishonesty?	4, 1	0, 10
		members, managers, or employees in your organization or v, statute, rule or regulation concerning fraud, deceit, or an
	OLLECT	
☐ Yes ☐ No (If "Yes," please explain. Use an addition	nal piece of paper if necessary.)	
Are there any unresolved complaints filed again regulatory / governmental authority?	inst your business, including litigation, arbitration, l	Better Business Bureau, or other similar tribunal, or relevant
☐ Yes ☐ No (If "Yes," please explain each instance. U	se an additional piece of paper if necessary.)	
Administration Order)?		eivership proceedings (including entering into a CVA, IVA or
Hac your company ownership or principals of	or boon the cubiect of bankruptcy incolvency or rec	oivership presendings (including entering into a CVA_TVA or

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for membership in the dealer network of the Certified Collectibles Group Companies.



REFERENCES

PLEASE LIST FOUR (4) COLLECTIBLES-RELATED REFERENCES WITH WHOM YOU'VE HAD BUSINESS DEALINGS FOR THE PAST YEAR OR MORE. THE SAME REFERENCES MAY APPLY FOR ALL CCG COMPANIES.

THIS SECTION MUST BE COMPLE IF HAND WRITING, PLEASE PRIN		For CCG Companies use only:
Name:		
Company:		
Title:	Phone:	
City:	State:	
POSTAL CODE / ZIP:	Country:	
Email address:	COLL	
Name:		
Company:		(1) O.
Title:	Phone:	
City:	State:	2 2 2
POSTAL CODE / ZIP:	Country:	201/
Email address:	ш [ў / \	
Name:		
Company:		2 4
Title:	Phone:	3/4/4
City:	State:	
POSTAL CODE / ZIP:	Country:	THE PARTY OF THE P
Email address:	10R17	- D D
Name:		
Company:		
Title:	Phone:	
City:	State:	
POSTAL CODE / ZIP:	Country:	
Email address:		

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for membership in the dealer network of the Certified Collectibles Group Companies.



Credit Card Approval and Release

The CCG Companies require a valid credit card from Authorized Dealer members. **This information must be provided even if you will use a different form of payment for services fees.** Credit card information will be stored with encryption by the CCG Companies.

In order to activate your Authorized Dealer Account, you must complete this form, sign and date it, and return it to:

• email to dealerapp@collectiblesgroup.com or by fax to 941-360-2553.

Authorized Dealer authorizes the CCG Companies to charge the below-listed credit card for all charges incurred for services requested and rendered, regardless of the final result of any grading and authentication opinion provided by the CCG Companies.

□ Visa □ MasterCard □ AmEx Credit Card #		Exp
Billing Address		
Name:	Street Address:	
City:	State:	ZIP:
Country:	Phone:	.0
Signature X	Print Name	Date

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SHIPPING INFORMATION FORM

This form is used to update your account contact, shipping and insurance information with the CCG Companies.

Please return this completed and signed form to: CCG, Attention: Customer Service, P.O. Box 4711, Sarasota, FL 34230, Fax: (+1) 941-360-2553, Email: service@collectiblesgroup.com



If we do not receive this form by the time your collectibles are ready to ship, we will automatically send them back to you, at your expense, via FedEx with insurance coverage of up to \$100,000 per package for US shipments and up to \$50,000 per package for international shipments.

Company / Member Name		CCG Account Number	
Address		Apartment, Suite, Floor	
City		State / Province	Postal Code
Country		Contact Person	
Phone	Fax	<u>E</u> mail	
2 SHIPPING INFORMA	TION		
\square Same as above information			
Company Name / Member Name		0	
Address		Apartment, Suite, Floor	
City		State / Province	Postal Code
Country		Contact Person	3.
Phone	Fax	Email	
☐ Return ship via CCG's standar IMPORTANT: ONLY FILL OUT THE number and indicate the private i limits of your insurance coverage	d method —OR—	o via Customer's preferred method and account. YOUR OWN FedEx or UPS account for return shipping. Your such shipments. We will use reasonable efforts to ship limits below, or if you indicate \$0, we will make shipment during return shipment.	your items to you such that shipments are within the s as you have instructed, but you understand that these
Return ship via CCG's standar IMPORTANT: ONLY FILL OUT THE number and indicate the private i limits of your insurance coverage shipments will not be insured and If you do not provide your own ac	d method —OR—	YOUR OWN FedEx or UPS account for return shipping. You such shipments. We will use reasonable efforts to ship limits below, or if you indicate \$0, we will make shipment during return shipment. CCG does not procure insurance hip your collectibles back to you, at your expense, via Fed	your items to you such that shipments are within the s as you have instructed, but you understand that these e for shipments made on a customer's own account.
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Return ship via CCG's standar IMPORTANT: ONLY FILL OUT THE number and indicate the private i limits of your insurance coverage shipments will not be insured and If you do not provide your own ac \$100,000 per package for US ship SHIPPING SERVICES	d method -OR- Return ships ESECTION BELOW IF YOU WISH TO USE insurance amounts that you carry for an . If you do not indicate your insurance ld you assume all risk of loss or damage ecount number, we will automatically shoments and up to \$50,000 per package INSURED VALUE LI	YOUR OWN FedEx or UPS account for return shipping. Your such shipments. We will use reasonable efforts to ship limits below, or if you indicate \$0, we will make shipment during return shipment. CCG does not procure insurance hip your collectibles back to you, at your expense, via Fed for international shipments. MITS	your items to you such that shipments are within the s as you have instructed, but you understand that these e for shipments made on a customer's own account. Ex with insurance coverage procured by CCG of up to
□ Return ship via CCG's standar IMPORTANT: ONLY FILL OUT THE number and indicate the private i limits of your insurance coverage shipments will not be insured and If you do not provide your own ac \$100,000 per package for US ship SHIPPING SERVICES Please select your service: □ FedEx □ UPS (Choose one.)	d method -OR- Return ships ESECTION BELOW IF YOU WISH TO USE insurance amounts that you carry for an . If you do not indicate your insurance ld you assume all risk of loss or damage ecount number, we will automatically shoments and up to \$50,000 per package INSURED VALUE LI	YOUR OWN FedEx or UPS account for return shipping. You such shipments. We will use reasonable efforts to ship limits below, or if you indicate \$0, we will make shipment during return shipment. CCG does not procure insurance hip your collectibles back to you, at your expense, via Fed for international shipments. MITS uuired for expedited delivery services. Please complete the	your items to you such that shipments are within the s as you have instructed, but you understand that these e for shipments made on a customer's own account. Ex with insurance coverage procured by CCG of up to
□ Return ship via CCG's standar IMPORTANT: ONLY FILL OUT THE number and indicate the private i limits of your insurance coverage shipments will not be insured and If you do not provide your own ac \$100,000 per package for US ship SHIPPING SERVICES Please select your service: □ FedEx □ UPS (Choose one.) □ Always	d method -OR- Return ship E SECTION BELOW IF YOU WISH TO USE insurance amounts that you carry for an . If you do not indicate your insurance I d you assume all risk of loss or damage count number, we will automatically sl iments and up to \$50,000 per package INSURED VALUE LI This information is req Your FedEx OR UPS acc	YOUR OWN FedEx or UPS account for return shipping. You such shipments. We will use reasonable efforts to ship limits below, or if you indicate \$0, we will make shipment during return shipment. CCG does not procure insurance hip your collectibles back to you, at your expense, via Fed for international shipments. MITS uuired for expedited delivery services. Please complete the	your items to you such that shipments are within the s as you have instructed, but you understand that these e for shipments made on a customer's own account. Ex with insurance coverage procured by CCG of up to
□ Return ship via CCG's standar IMPORTANT: ONLY FILL OUT THE number and indicate the private i limits of your insurance coverage shipments will not be insured and If you do not provide your own ac \$100,000 per package for US ship SHIPPING SERVICES Please select your service: □ FedEx □ UPS (Choose one.)	d method -OR- Return ship E SECTION BELOW IF YOU WISH TO USE insurance amounts that you carry for an. If you do not indicate your insurance I d you assume all risk of loss or damage count number, we will automatically sl ments and up to \$50,000 per package INSURED VALUE LI This information is req Your FedEx OR UPS acc Your Per Box Insurance	YOUR OWN FedEx or UPS account for return shipping. You such shipments. We will use reasonable efforts to ship limits below, or if you indicate \$0, we will make shipment during return shipment. CCG does not procure insurance hip your collectibles back to you, at your expense, via Fed for international shipments. MITS uired for expedited delivery services. Please complete the count # (Required):	your items to you such that shipments are within the s as you have instructed, but you understand that these e for shipments made on a customer's own account. Ex with insurance coverage procured by CCG of up to
Return ship via CCG's standar IMPORTANT: ONLY FILL OUT THE number and indicate the private i limits of your insurance coverage shipments will not be insured and If you do not provide your own ac \$100,000 per package for US ship SHIPPING SERVICES Please select your service: FedEx UPS (Choose one.) Always -OR-	d method -OR- Return ship E SECTION BELOW IF YOU WISH TO USE insurance amounts that you carry for an. If you do not indicate your insurance I d you assume all risk of loss or damage count number, we will automatically sl ments and up to \$50,000 per package INSURED VALUE LI This information is req Your FedEx OR UPS acc Your Per Box Insurance	YOUR OWN FedEx or UPS account for return shipping. You such shipments. We will use reasonable efforts to ship limits below, or if you indicate \$0, we will make shipment during return shipment. CCG does not procure insurance hip your collectibles back to you, at your expense, via Fed for international shipments. MITS United for expedited delivery services. Please complete the count # (Required):	your items to you such that shipments are within the s as you have instructed, but you understand that these e for shipments made on a customer's own account. Ex with insurance coverage procured by CCG of up to
□ Return ship via CCG's standar IMPORTANT: ONLY FILL OUT THE number and indicate the private i limits of your insurance coverage shipments will not be insured and If you do not provide your own ac \$100,000 per package for US ship SHIPPING SERVICES Please select your service: □ FedEx □ UPS (Choose one.) □ Always - OR-	d method -OR- Return ship E SECTION BELOW IF YOU WISH TO USE insurance amounts that you carry for an. If you do not indicate your insurance I d you assume all risk of loss or damage count number, we will automatically sl ments and up to \$50,000 per package INSURED VALUE LI This information is req Your FedEx OR UPS acc Your Per Box Insurance Your Per Day Insurance Ship on Friday (Required Specify delivery:	YOUR OWN FedEx or UPS account for return shipping. You such shipments. We will use reasonable efforts to ship limits below, or if you indicate \$0, we will make shipment during return shipment. CCG does not procure insurance hip your collectibles back to you, at your expense, via Fed for international shipments. MITS uired for expedited delivery services. Please complete the count # (Required): te Limit (Required): te Limit (Required): Yes	your items to you such that shipments are within the s as you have instructed, but you understand that these for shipments made on a customer's own account. Ex with insurance coverage procured by CCG of up to his section in full.
Return ship via CCG's standar IMPORTANT: ONLY FILL OUT THE number and indicate the private i limits of your insurance coverage shipments will not be insured and If you do not provide your own ac \$100,000 per package for US ship SHIPPING SERVICES Please select your service: FedEx UPS (Choose one.) Always OR-	d method -OR- Return ship E SECTION BELOW IF YOU WISH TO USE insurance amounts that you carry for an. If you do not indicate your insurance I d you assume all risk of loss or damage count number, we will automatically sl ments and up to \$50,000 per package INSURED VALUE LI This information is req Your FedEx OR UPS acc Your Per Box Insurance Your Per Day Insurance Ship on Friday (Required Specify delivery:	YOUR OWN FedEx or UPS account for return shipping. You such shipments. We will use reasonable efforts to ship limits below, or if you indicate \$0, we will make shipment during return shipment. CCG does not procure insurance hip your collectibles back to you, at your expense, via Fed for international shipments. MITS United for expedited delivery services. Please complete the count # (Required):	your items to you such that shipments are within the s as you have instructed, but you understand that these for shipments made on a customer's own account. Ex with insurance coverage procured by CCG of up to his section in full.
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Return ship via CCG's standar IMPORTANT: ONLY FILL OUT THE number and indicate the private i limits of your insurance coverage shipments will not be insured and If you do not provide your own at \$100,000 per package for US ship SHIPPING SERVICES Please select your service: FedEx UPS (Choose one.) Always OR- Only when requested Please update shipping inform If you do not select a company, your second	d method -OR- Return ship E SECTION BELOW IF YOU WISH TO USE insurance amounts that you carry for an. If you do not indicate your insurance I d you assume all risk of loss or damage count number, we will automatically sl ments and up to \$50,000 per package INSURED VALUE LI This information is req Your FedEx OR UPS acc Your Per Box Insuranc Your Per Day Insuranc Ship on Friday (Required Specify delivery: Next day a.m. Next hipping information will be updated for all of	YOUR OWN FedEx or UPS account for return shipping. You such shipments. We will use reasonable efforts to ship imits below, or if you indicate \$0, we will make shipment during return shipment. CCG does not procure insurance hip your collectibles back to you, at your expense, via Fed for international shipments. MITS Output	your items to you such that shipments are within the s as you have instructed, but you understand that these for shipments made on a customer's own account. Ex with insurance coverage procured by CCG of up to his section in full.
IMPORTANT: ONLY FILL OUT THE number and indicate the private i limits of your insurance coverage shipments will not be insured and \$100,000 per package for US ship SHIPPING SERVICES Please select your service: FedEx UPS (Choose one.) Always OR- Only when requested	d method -OR- Return ship E SECTION BELOW IF YOU WISH TO USE insurance amounts that you carry for an. If you do not indicate your insurance I d you assume all risk of loss or damage count number, we will automatically sl ments and up to \$50,000 per package INSURED VALUE LI This information is req Your FedEx OR UPS acc Your Per Box Insuranc Your Per Day Insuranc Ship on Friday (Required Specify delivery: Next day a.m. Next hipping information will be updated for all of	YOUR OWN FedEx or UPS account for return shipping. You such shipments. We will use reasonable efforts to ship imits below, or if you indicate \$0, we will make shipment during return shipment. CCG does not procure insurance hip your collectibles back to you, at your expense, via Fed for international shipments. MITS Output	your items to you such that shipments are within the s as you have instructed, but you understand that these for shipments made on a customer's own account. Ex with insurance coverage procured by CCG of up to his section in full.

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NGC, NCS, PMG and CGC can send different reports to the people that you designate. In order to activate your Authorized Dealer Account, you must complete this form, date and sign it, and return it by email to dealerapp@collectiblesgroup.com or by fax to 941-360-2553.



Please update this information for: NGC and NCS PMG CGC If you do not select a company, your authorized contact information will be updated for all each CCG Company.	. If you wish to provide different recipients for multiple CCG Cor	npanies, please fill out a separate form for
ACCOUNT INFORMATION		
Company Name	Account Number	
Contact Person (Required)		
Address	Apartment, Suite, Floor	
City	State/Province ZIP/Po	ostal Code
Country	Email (Required)	
Phone	Fax	
SUBMISSION ACKNOWLEDGMENT (Daily report of submissions r		
\Box I decline to receive automated Submission Acknowledgments for this account		
Recipient Name	Email	
Recipient Name	Email	
Recipient Name	Email	
SHIPMENT SUMMARY (Daily report of submissions returned)	_\\\ <i>\\</i>	
☐ I decline to receive automated Shipment Summaries for this account via Ema		
Recipient Name	Email	71/
Recipient Name	Email	
Recipient Name	Email	
GRADING REPORT (Grading results for submissions)	William C	
☐ I decline to receive automated Grading Reports for this account via Email		
Recipient Name	Email	
Recipient Name	Email	
Recipient Name	Email	
ACCOUNTING REPORT (Billing Statement, Invoices, Prescreen Submis	sion Detail)	
$\square\operatorname{I}$ decline to receive automated Accounting Reports for this account via Email		
Recipient Name	Email	
Recipient Name	Email	
Recipient Name	Email	
I authorize the above individual(s) to receive the Customer Authorization reports as reques	sted.	
Authorized Signature	Print Name	Date

SUPPORT THE NATIONAL COIN & BULLION ASSOCIATION (NCBA)

1.2023

Important Note for NGC, NCS and / or PMG Authorized Dealer Applicants in the United States:

The National Coin & Bullion Association (NCBA) is a United States 501(c)(6) tax-exempt trade organization dedicated to the coins, currency and bullion communities. NCBA serves as the industry's watchdog to maintain a favorable legislative and regulatory climate in the US federal government and individual US state governments for coin dealers, collectors and investors. Among its efforts, NCBA lobbies against taxation schemes that are harmful to dealers, collectors and investors of coins, paper money and bullion.



We strongly encourage CCG Authorized Dealers active in the coin, paper money and bullion markets to support NCBA. To make it easier for you to support NCBA, we have established a program whereby a \$0.25 surcharge is applied to the grading fee for each coin submitted to NGC or note submitted to PMG, and then remitted to NCBA. Your support is a vital source of funding for this very worthy effort.

Please return this completed and signed form to: CCG, Attention: Customer Service, P.O. Box 4711, Sarasota, FL 34230, Fax: 941-360-2553 or Email: service@collectiblesgroup.com

Address	Apartment, Suite, Floor			
	•	Apartment, Suite, Floor		
City	State / Province	Postal Code		
Country	Contact Person			
Phone Fax	<u>Email</u>			
2 NCBA PROGRAM SELECTION	15 July 11 11 11 11 11 11 11 11 11 11 11 11 11			
☐ I wish to participate in CCG's program to support NCBA.				
$\ \square$ I do NOT wish to participate in CCG's program to support NCBA.				
If you do not make a selection, you will be automatically enrolled in	CCG's program to support NCBA.			

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