

ACKNOWLEDGEMENT OF RECEIPT

RECEIPT

This disclosure document summarizes certain provisions of the Charter Practice Agreement and other information in plain language. Read this disclosure document and all agreements carefully.

If CPI offers you a franchise, it must provide this disclosure document to you 14 calendar-days before you sign a binding agreement with, or make any payment to, CPI or an affiliate in connection with the proposed Charter Practice sale.

If CPI does not deliver this disclosure document on time or if it contains a false or misleading statement, or a material omission, a violation of federal law and state law may have occurred and should be reported to the Federal Trade Commission, Washington, D C 20580 and the appropriate state administrator listed in Exhibit L of this disclosure document.

Under Maryland and New York state law, CPI must provide this disclosure document to you at the earlier of (a) the first personal meeting, (b) 10 business days prior to the execution of the franchise or other agreement, or (c) the payment of any consideration that relates to the franchise relationship.

The following person(s) acted as franchise seller for CPI

- Name: _____
8000 N E Tillamook Street, Portland, Oregon 97213 Phone 503-922-5000
- Name _____
8000 N E Tillamook Street, Portland, Oregon 97213 Phone 503-922-5000

Date of issuance April 30, 2012

See Exhibit M of this disclosure document for a list of registered agents authorized to receive service of process.

I received a disclosure document dated _____, included the following Exhibits: A Financial Statements, B Charter Practice Agreement, C Designation of Responsibility, D Master Operations Agreement, E List of Charter Practice Operators (Current and Former); F Operating Manual Table of Contents, G Schuyler, LLC Product Line, H Financing Commitment, I Security Agreement, J Agency Agreement (Opening Order), K Agency Agreement (Ongoing Orders), L List of State Administrators, M Agents for Service of Process, N Confidentiality Agreement, O Assignment, Assumption & Consent Agreement, Personal Guarantee; P General Release; Q Asset Purchase Agreement, R Commitment for Hospital Location, S Additional State-Required Information, and T Legal Compliance Questionnaire.

IF EXECUTED BY AN INDIVIDUAL Signature _____ Print Name _____	Date _____
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IF EXECUTED BY PARTNERS OR OFFICER OF A CORPORATION OR LIMITED LIABILITY COMPANY

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