



**First Financial Merchant Services**  
Card Processing You Can Count On

## **Fast Track Approval Checklist**

To: Support Department at First Financial Merchant Services  
Email: accounts@ffusa.com  
Fax: 763-231-2207

Merchant: \_\_\_\_\_

Date: \_\_\_\_\_

Sales Partner: \_\_\_\_\_ Sales Partner ID: \_\_\_\_\_

- Completed and signed “Merchant Account Order Form”
- Section 1 – Business Information – Include *ALL* highlighted fields  
Make sure to include business type (Sole Proprietorship, Corporation, Tax Exempt, etc.)
- Section 2 – Addt’l Credit/Site Survey Information
- Section 3 – Owners/Partners/Officers  
Make sure to get the **home** address and telephone # for each individual who holds  $\geq 25\%$  equity of business
- Section 4 – Settlement Information
- Section 5 – Transaction Information  
Collect all applicable card type information and transaction percentages (**Note: Internet denotes transactions run via eCommerce**)
- Signatures on Page 7 of the Merchant Processing Agreement
- Signature and Legal Name on Confirmation Page
- Owner Initials on all pages of the Merchant Processing Agreement
- Copy of Voided Check or Bank Letter  
**No starter checks.** If the merchant doesn’t have a printed check, they must provide a bank letter that is printed on their bank’s letterhead and must contain the merchant’s DBA or legal name, bank account and routing numbers, signed by bank representative and include contact information.
- Completed and signed W-9
- Completed Giveback Form

**MERCHANT ACCOUNT ORDER FORM**



Business Name: \_\_\_\_\_

Shipping Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Agent Name/ID: \_\_\_\_\_ Joint Venture/Referrer Code: \_\_\_\_\_

**ACCOUNT STATUS:**  New Service  Conversion  
**Proposition:**  N/A  JV  GiveBack

**SERVICES:**

In addition to Visa, MasterCard, what does merchant currently / want to accept?

Discover  American Express (AMEX)  PIN Debit  Check Services  WEX  Voyager  EBT # \_\_\_\_\_

**Check Services:**  Telecheck(complete Telecheck paperwork)  Check Reader Type \_\_\_\_\_

**Supplies:** Support Agreement, printer paper, imprinter slips, ribbon, supplies \$9.95/mo. included with all accounts.

**Gift Card Services:**  (complete gift card paperwork)

**TERMINAL OR SOFTWARE TYPE:**

**Clover:**

Clover Station Solo  Clover Duo  Clover Mini  Clover Mini 3<sup>rd</sup> Gen  Clover Flex 2<sup>nd</sup> Gen

Clover Flex 3<sup>rd</sup> Gen  Clover Go 2<sup>nd</sup> Gen  Clover Go 3<sup>rd</sup> Gen  Clover Accessories: \_\_\_\_\_

**Terminal:**

FD150  FD200ti  Other: \_\_\_\_\_

**PIN Pad:**

RP10  Other: \_\_\_\_\_  Ship New  Serial Number for Re-Encryption \_\_\_\_\_

**POS / Software** \_\_\_\_\_ Version # \_\_\_\_\_

Licensed Platform:  Omaha  Nashville  North  Buypass  Other: \_\_\_\_\_

**eCommerce / Internet**

First Financial Gateway (NMI) E-mail for Activation: \_\_\_\_\_

Authorize.net Conversion – Payment Gateway ID: \_\_\_\_\_  New Authorize.net Setup

Card Acceptance:  Swiped / Retail  Keyed / MOTO  Link to active website / eCommerce

**PHONE LINE TYPE:**

Standard Analog Dial-up  IP Dial-out (High Speed)  Special Number to Dial Out (ex: Dial 9 to get out) What number? \_\_\_\_\_

**Additional information – Help ensure a smooth transition (for terminal download only):**

**Auto Close:**  Yes Time: \_\_\_\_\_ AM / PM  No

**Tip line on receipt?**  Yes  No **Daily Settlement Report:**  Totals / Basic  Detailed

*\*Note: If above information is not specified they will be set up as follows: Retail – Auto Close at 11PM, No Tip; Restaurant – No Auto Close with tip.*

*Receipts default to "Detailed Reports."*

QTY	Item	Price	Total
1	Processing	95.00	
1	Set Up	90.00	
	Shipping/Handling <input type="checkbox"/> 2 <sup>nd</sup> Day (\$19) <input type="checkbox"/> Overnight (\$39) <input type="checkbox"/> Clover Station (\$70)		
	<b>Sales tax (All States)</b>		
	<b>Total Due Now</b>		

**Payment Method: (Select One)**

Please debit my account

Bank Account # \_\_\_\_\_ Routing # \_\_\_\_\_

Please charge my Visa/Mastercard/Discover/Amex

Card # \_\_\_\_\_ Exp Date: \_\_\_\_\_

CVV: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

Cardholder Address: \_\_\_\_\_

City, State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Thank you for your order!** Your signature authorizes: The above order, First Financial Merchant Services or its assigns authority to conduct background and credit checks on you and your business, report payment history to credit agencies, and acknowledges that you have read and agree to the terms and conditions on both sides of this document, including support agreement acceptance and cancellation, restocking and deactivation costs. Returned checks/debits subject to a \$29 fee. If you are applying for Visa/Mastercard, American Express, Discover, Check Services, Etc; each has their own separate and individual approval processes. First Financial Merchant Services is not a bank, nor party to those agreements. Please make check payable to **First Financial Merchant Services**.

Accepted By, Title \_\_\_\_\_

Date \_\_\_\_\_

## TERMS AND CONDITIONS

1 AGREEMENT FOR PRE-AUTHORIZED AUTOMATIC PAYMENTS. Merchant hereby authorizes and requests FIRST FINANCIAL and/or assigns to initiate debit/credit entries to Merchant's checking account as such amounts become due for any equipment, supplies, services or any additional program fee assessed, including any Merchant Processing Agreement Fees. This authority is to remain in full force and effect until FIRST FINANCIAL and Depository have received written notification from merchant (authorized signer for business) of its termination in such time and in such manner as to afford FIRST FINANCIAL and Depository reasonable opportunity to collect all fees due FIRST FINANCIAL and to act on it.

2 EVENT OF DEFAULT. If any one of the following events (each a "Default") shall occur then to the extent permitted by applicable law, we shall have the right to exercise any one or more of the remedies set forth in paragraph 3 below, (a) you fail to pay any rental, lease, extended terms, invoice or purchase order total amounts due; (b) you fail to initiate or fulfill your lease or installation obligations after receiving equipment, software or services supplied by FIRST FINANCIAL or agents or assigns, after 10 days of equipment software, services receipt or invoice/purchase order due date.

3 REMEDIES. If a Default occurs, we may do any or all of the following: (a) terminate any or all of your agreements with service providers; (b) declare all unpaid lease payments until the end of the term, any rental, lease, extended terms or purchase order total or partial amounts due and other amounts immediately due and payable; (c) repossess or render unusable, any property attached to this agreement wherever located, without demand or notice, without any court order or process of law and without liability to you for any damages occasioned by such action; (d) debit your business or personal depository account(s) for all amounts due; (e) request bank divert your card processing proceeds to cover your default; (f) require you to deliver the property to a location designated by us; (g) proceed by court action to enforce performance by you and/or recover all damages and expenses by us by reason of any default. Any delay or failure to enforce our rights hereunder does not prevent us from enforcing our rights at a later time.

4 LATE PAYMENTS AND COLLECTION COSTS. If you do not make payment within 10 days of its due date, you must pay, in addition to the payment, a late charge of \$29.00 in addition to the payment. Each month the past due payment remains unpaid, an additional late fee of \$29.00 will be assessed. You will pay our collection costs and reasonable attorney's fees. Such collection costs include but are not limited to collection letters and collection calls and to charges of collection agencies, courts, sheriffs, etc. There will be a processing fee of \$29.00 for each returned check, automatic bank account debit or for any rejected credit card charge. Payments are applied to late fees and then to processing charges first and then to equipment, software or service obligations.

5 CANCELLATION, RESTOCKING, NON-ACTIVE, AND DEACTIVATION COSTS. If you purchased your equipment and return said equipment within ten (10) days of receipt unused in original condition, working order and with original packaging you may be eligible for refund minus shipping, deactivation fee and 15% restocking fee. If you cancel your bank card Merchant Processing Account, your FIRST FINANCIAL deactivation fee will depend on the type(s) of service(s) you ordered and will be the greater of 6 months' anticipated Merchant Processing Agreement processing fees or \$695.00. If your account goes into non-active status, the monthly minimum will increase to \$42.99. If merchant swaps PIN pad and does not return original to FIRST FINANCIAL within 2 weeks FIRST FINANCIAL will debit merchant's account for \$250.00.

6 SECURITY, COMPLIANCE, ACCURATE RECORDS, PROPER FUNDS TRANSFER AND ANNUAL REVIEW - To assure compliance, updated and accurate files, merchant accounts will periodically be audited, updated and/or adjusted to comply with current FIRST FINANCIAL, Banking, Association (Visa and MasterCard) and or Security standards. All accounts will be assessed an annual \$89.00 Compliance Service Fee. In the event your account is closed in mid year, the annual fee will still be assessed. Processing and application fees are not refundable. From time to time, one of our service representatives may contact you for file updates to assure proper funds transfer and/or make an update to the functionality of your credit card terminal.

7 SUPPORT AGREEMENT: Discounted Supplies and Equipment Assurance. Merchant authorizes and requests to participate in Support Agreement whereby merchant pays \$9.95/month in exchange for terminal/prINTER replacement service (equipment assurance), described below, and a maximum quantity per quarter, of six (6) rolls of paper or five (5) manual imprinter slip packs (plus one (1) printer ribbon (if necessary)). Additional equipment and supplies requested by merchant will be shipped at discounted price plus shipping and handling. Merchant hereby authorizes FIRST FINANCIAL (or agent/assigns) to initiate debit/credit entries to Merchant's checking account as such amounts become due and for any additional supplies or services as requested. Merchant will be charged \$9.95 monthly until subscription is cancelled. Previous charges won't be refunded when you cancel unless it's legally required. Your payment data is encrypted and secure. If Merchant does not want Support Agreement, merchant simply crosses it out on the opposite side, writes "declined" and initials next to line.

a) FIRST FINANCIAL and/or assigns will accept service calls as reasonably requested, which would include operational instruction and replacement of parts broken on equipment supplied by FIRST FINANCIAL. These calls will be performed during regular business hours. This agreement shall not include labor, parts, or expense necessary to repair damage caused by fire, flood accident, improper voltages, misuse, use of the equipment for purposes other than for which it is designated, service performed by persons other than employees or failure to continually provide a suitable environment.

b) FIRST FINANCIAL will provide equipment swap (one (1) terminal or printer swap per thirty-six (36) months) at no charge if the equipment must be removed from the customer for shop repair/replacement. However, there will be a nominal transaction entering, rental or equipment swap charge if the equipment must be removed resulting from any problem other than normal use or if outside the free swap period.

c) FIRST FINANCIAL may, at its option, refuse to service the referenced equipment during any period, which the customer's account with is overdue and remains delinquent. Equipment not provided by FIRST FINANCIAL subject to approval and 90 day proving period.

d) Replacing ribbons, adding paper, and removing jammed printer rolls are specifically not covered by this agreement.

e) The customer agrees to the terms and conditions of this agreement, which constitutes the entire understanding between the parties and further understands that no other written or oral representations by any other party shall be binding upon.

f) State, Federal, Local, and other applicable taxes will be added to conform with laws governing this type of Support Agreement.

g) This agreement subject to modification, changes and additions as determined by FIRST FINANCIAL.

h) In no event will FIRST FINANCIAL have any liability for any indirect, special, or consequential damages arising out of this Agreement.

i) Term of this Support Agreement will be monthly and the merchant will be covered for every full month paid in advance. Support Agreement may be cancelled at anytime upon receipt of (10) days written notice by FIRST FINANCIAL.

8 In order to receive processing (credit card, debit card, gift card, check, etc.) services, merchant understands that they must meet credit and/or business and or personal underwriting and or qualifying criteria and contract directly with processing company and/or bank. Merchant's relationship under these agreements is not with FIRST FINANCIAL and FIRST FINANCIAL is not responsible, bears no liability for services or claims that arise under those agreements.

Sales Office \_\_\_\_\_ Print Sales Rep Name \_\_\_\_\_ Sales ID# \_\_\_\_\_  
 Merchant Number \_\_\_\_\_ Sales Rep. Signature \_\_\_\_\_ Phone #: \_\_\_\_\_

**1. BUSINESS INFORMATION**

Client's Business Name (Doing Business As):			Client's Corporate/Legal Name (Use Also For Headquarter's Information):		
Business Address:			Billing Address (If Different Than Location Address):		
City:	State:	Zip:	City:	State:	Zip:
Location Phone #:		Location Fax #:	Contact Name:		
Business E-mail Address:			Contact Fax # / E-mail Address:		
Business Website Address:			Contact Phone #:		
Date Business Started:			Send Retrieval Requests to: <input type="checkbox"/> Business Location <input type="checkbox"/> Corp/Legal Location Send Merchant Monthly Statement to: <input type="checkbox"/> Business Location <input type="checkbox"/> Corp/Legal Location		
Customer Service Phone #:		Customer Service E-mail Address:	Statement Delivery Method: (choose one) <input checked="" type="checkbox"/> Print and Mail <input type="checkbox"/> Online via AccessOne		
<input type="checkbox"/> INDIVIDUAL/SOLE PROPRIETORSHIP: State in which Certificate of Assumed Name Filed: _____ State: _____		<input type="checkbox"/> TAX EXEMPT ORGANIZATION (501C) State: _____		<input type="checkbox"/> GOVERNMENT (Federal, State, Local)	
<input type="checkbox"/> CORPORATION - CHAPTER S, C State: _____		<input type="checkbox"/> INTERNATIONAL ORGANIZATION Location Filed: _____		<input type="checkbox"/> LIMITED LIABILITY COMPANY State Filed: _____	
<input type="checkbox"/> MEDICAL OR LEGAL CORPORATION State: _____		<input type="checkbox"/> ASSOCIATION/ESTATE/TRUST State Filed: _____		<input type="checkbox"/> PARTNERSHIP State Filed: _____	
Name (as it appears on your income tax return; if Sole Proprietor, must include middle initial)		FEDERAL TAX ID # (as it appears on your income tax return)		<input type="checkbox"/> I certify that I am a foreign entity/nonresident alien. (If checked, please attach IRS Form W-8.)	

**NOTE:** Failure to provide accurate information may result in a withholding of merchant funding per IRS regulations. (See Part IV, Section A.4 of your Program Guide for further information.)

\*SIC/MCC: \_\_\_\_\_ Final Auth. Indicator:  0 (Pre Auth.)  1 (Final Auth.) IATA/ARC: \_\_\_\_\_ (MCC 4722 Only)

Note: \*If your business is classified as High Risk and assigned (or is later assigned based upon your business activity) any of the following Merchant Category Codes (MCC): 5966, 5967 and 7841<sup>1</sup>, then registration is required with Visa and/or Mastercard within 30 days from when your account becomes active. An Annual Registration Fee of \$500 may apply for Visa and/or Mastercard (total registration fees could be \$1,000.00). Failure to register could result in fines in excess of \$10,000.00 for violating Visa and/or Mastercard regulations<sup>2</sup>.

<sup>1</sup>Registration for MCC 7841 is only required for non-face-to-face adult content.

<sup>2</sup>Information herein, including applicable MCCs, is subject to change.

Detailed Explanation of Type of Merchandise, Products or Services Sold:

**2. ADDITIONAL CREDIT / SITE SURVEY INFORMATION - ALL MERCHANTS**

<p>1. Zone: <input type="checkbox"/> Business District <input type="checkbox"/> Industrial <input type="checkbox"/> Residential</p> <p>2. Location: <input type="checkbox"/> Mall <input type="checkbox"/> Office <input type="checkbox"/> Home <input type="checkbox"/> Shopping Area  <input type="checkbox"/> Apartment <input type="checkbox"/> Isolated <input type="checkbox"/> Door-to-Door  <input type="checkbox"/> Flea Market <input type="checkbox"/> Other</p> <p>3. How many employees: _____</p> <p>4. How many registers/Terminals: _____</p> <p>5. Is proper license visible? <input type="checkbox"/> Yes  <input type="checkbox"/> No, explain: _____</p> <p>6. Where is the merchant name displayed at the site?  <input type="checkbox"/> Window <input type="checkbox"/> Door <input type="checkbox"/> Store Front</p> <p>7. Merchant Occupies: <input type="checkbox"/> Ground Floor <input type="checkbox"/> Other: _____</p> <p>8. # of Floors/Levels: <input type="checkbox"/> 1 <input type="checkbox"/> 2-4 <input type="checkbox"/> 5-10 <input type="checkbox"/> 11+</p> <p>9. Remaining Floor(s) Occupied by:  <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Combination <input type="checkbox"/> None</p> <p>10. Approximate Square Footage:  <input type="checkbox"/> 0-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501-2,000 <input type="checkbox"/> 2,001 plus</p> <p>11. Are customers required to leave a deposit?  <input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, % of deposit required: _____%</p> <p>12. Return Policy: <input type="checkbox"/> Full Refund <input type="checkbox"/> Exchange Only <input type="checkbox"/> None</p>	<p>13. Do you have a refund policy for Mastercard/Visa/Discover Network - PayPal/American Express OptBlue Sales?  <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, check one:  <input type="checkbox"/> Exchange <input type="checkbox"/> Mastercard/Visa/Discover Network - PayPal/  <input type="checkbox"/> Store Credit American Express OptBlue Credit                  If Mastercard/V/Discover Network - PayPal/American Express OptBlue Credit, within how many days do you submit credit transactions?  <input type="checkbox"/> 0-3 <input type="checkbox"/> 4-7 <input type="checkbox"/> 8-14 <input type="checkbox"/> Over 14</p> <p>14. Advertising Method (Attach at least one):  <input type="checkbox"/> Catalog <input type="checkbox"/> Brochure <input type="checkbox"/> Direct Mail <input type="checkbox"/> TV/Radio  <input type="checkbox"/> Internet <input type="checkbox"/> Phone <input type="checkbox"/> Newspaper/Journals <input type="checkbox"/> Other  <i>Marketing Materials required for Mail Order, B to B, Internet over \$1 Million in annual volume. Attach Web Page for Internet Merchant.</i></p> <p>15. Previous Processor: _____</p> <p>16. Check Reason For Leaving: <input type="checkbox"/> Rate <input type="checkbox"/> Service <input type="checkbox"/> Terminated <input type="checkbox"/> Other: _____</p> <p>17. Does your business offer products and/or services to customers through a mobile application: <input type="checkbox"/> Yes <input type="checkbox"/> No                  If so, list name of mobile application: _____</p> <p><b>Mail / Telephone Order / Business to Business / Internet Information</b>                  (All Questions must be Answered)</p> <p>1. What is the time frame from transaction to delivery? (% of orders delivered in):                  0-7 days _____ % + 8-14 days _____ % + 15-30 days _____ % + 31-90 days _____ % +                  91-180 days _____ % + over 180 days _____ % = <b>100%</b></p> <p>2. Mastercard/Visa/Discover Network - PayPal/American Express OptBlue sales are deposited (check one):  <input type="checkbox"/> Date of order <input type="checkbox"/> Date of delivery <input type="checkbox"/> Other (specify): _____</p> <p>3. Does any of your cardholder billing involve automatic renewals or recurring transactions (i.e., cardholder authorizes initial sale only)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
--	---

O\_WF\_R\_2701 **3. OWNERS INFORMATION** O\_WF\_R\_2701

**Controlling Individual:** An individual with significant responsibility for managing the legal entity (e.g., a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer). Applies to private corporations, limited liability corporations, or partnerships.

**Controlling Individual**

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Ownership %: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
 Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

**Beneficial Owners:** Each individual, if any, who owns, directly or indirectly, 25 percent or more of the equity interests of the legal entity customer (e.g., each natural person that owns 25 percent or more of the shares of a corporation).

**Owner 1**

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Ownership %: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
 Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

**Owner 2**

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Ownership %: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
 Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

**Owner 3**

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Ownership %: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
 Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

**Owner 4**

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Ownership %: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
 Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

**4. SETTLEMENT INFORMATION**

**Deposit Bank:**

Transit / ABA #: \_\_\_\_\_ Deposit Account #: \_\_\_\_\_

ACH Detail Flag:  Individual  Combined  Separate (defaults to Combined if option not selected)

**5. TRANSACTION INFORMATION**

**FINANCIAL DATA**

Gross YEARLY Sales Volume (Cash + Credit + Debit + Check)	\$ _____	Avg. Mastercard/Visa/Discover Network-PayPal Ticket (Estimate If Never Processed in Past)	\$ _____	<b>WHERE IS SALE TRANSACTED?</b> (Must = 100%)
Average YEARLY Mastercard/Visa Volume	\$ _____	Avg. American Express OptBlue Ticket (Estimate If Never Processed in Past)	\$ _____	
Average YEARLY Discover Network-PayPal Volume	\$ _____	Highest Ticket Amount	\$ _____	
Average YEARLY American Express OptBlue Volume	\$ _____			
Seasonal? <input type="checkbox"/> No <input type="checkbox"/> Yes High Volume Months Open: _____				
				Store Front/Swiped _____ %
				Internet _____ %
				Mail Order _____ %
				Telephone Order _____ %
				<b>Total</b> _____ <b>100%</b>

**6. GRID INFORMATION - INTERNAL USE ONLY**

AUTHORIZATION GRID ID#: _____	USER DEFINED GRID ID#: _____	MFC GRID ID: _____ 8-pos. Alpha/Numeric
Mastercard TIERED GRID ID 8-pos. Alpha/Numeric	Visa TIERED GRID ID 8-pos. Alpha/Numeric	DISCOVER NETWORK - PayPal TIERED GRID ID 8-pos. Alpha/Numeric
Mastercard CREDIT MPG ID 8-pos. Alpha/Numeric	Visa CREDIT MPG ID 8-pos. Alpha/Numeric	DISCOVER NETWORK - PayPal CREDIT MPG ID 8-pos. Alpha/Numeric
Mastercard DEBIT MPG ID 8-pos. Alpha/Numeric	Visa DEBIT MPG ID 8-pos. Alpha/Numeric	DISCOVER NETWORK DEBIT MPG ID 8-pos. Alpha/Numeric
		AMERICAN EXPRESS OptBlue TIERED GRID ID 8-pos. Alpha/Numeric
		AMERICAN EXPRESS OptBlue CREDIT MPG ID 8-pos. Alpha/Numeric

**7. SERVICE FEE SCHEDULE**

**Accept all Mastercard, Visa, Discover Network and American Express OptBlue Transactions (presumed, unless any selections below are checked)**

<b>Mastercard</b>	<b>Visa</b>	<b>Discover Network</b>	<b>American Express OptBlue</b>
<input type="checkbox"/> Mastercard Credit Transactions	<input type="checkbox"/> Visa Credit Transactions	<input type="checkbox"/> Discover Network Credit Transactions	<input type="checkbox"/> American Express Credit Transactions
<input type="checkbox"/> Mastercard Non-PIN Debit Trans.	<input type="checkbox"/> Visa Non-PIN Debit Trans.	<input type="checkbox"/> Discover Network Non-PIN Debit Trans.	
		<b>Discover Network - PayPal</b>	
		<input type="checkbox"/> Discover Network - PayPal Credit Transactions	

**Discount Collected**  Daily  Monthly

O\_WF\_R\_2701 **7. SERVICE FEE SCHEDULE (cont'd)** O\_WF\_R\_2701

Tiered											
Discount Fees (Based on Gross Sales Volume)											
	Discount	MPG TXN Fee		Discount	MPG TXN Fee		Discount	MPG TXN Fee		Discount	MPG TXN Fee
Mastercard Qual Credit	%	\$	Visa Qual Credit	%	\$	Discover Network-PayPal Qual Credit	%	\$	American Express OptBlue Qual Credit	%	\$
Mastercard Mid-Qual Credit	%	\$	Visa Mid-Qual Credit	%	\$	Discover Network-PayPal Mid-Qual Credit	%	\$	American Express OptBlue Mid-Qual Credit	%	\$
Mastercard Non-Qual Credit	%	\$	Visa Non-Qual Credit	%	\$	Discover Network-PayPal Non-Qual Credit	%	\$	American Express OptBlue Non-Qual Credit	%	\$
Mastercard Worldcard Qual	%	\$	Visa Rewards 1	%	\$						
Mastercard Worldcard Mid-Qual	%	\$	Visa Rewards 2	%	\$						
Mastercard Worldcard Non-Qual	%	\$									
Mastercard Qual Debit	%	\$	Visa Qual Debit	%	\$	Discover Network Qual Debit	%	\$			
Mastercard Mid-Qual Debit	%	\$	Visa Mid-Qual Debit	%	\$	Discover Network Mid-Qual Debit	%	\$			
Mastercard Non-Qual Debit	%	\$	Visa Non-Qual Debit	%	\$	Discover Network Non-Qual Debit	%	\$			
Mastercard Regulated Debit Discount	%	\$	Visa Regulated Debit Discount	%	\$	Discover Network Regulated Debit Disc't	%	\$			

ERR											
	Discount	Non-Qual Fees		Discount	Non-Qual Fees		Discount	Non-Qual Fees		Discount	Non-Qual Fees
Mastercard Qual Credit	%	%	Visa Qual Credit	%	%	Discover Network-PayPal Qual Credit	%	%	American Express OptBlue Qual Credit	%	%
Mastercard Qual Debit	%	%	Visa Qual Debit	%	%	Discover Network Qual Debit	%	%			

**Pass Through Interchange**

Net Only - Includes Dues and Assessments     Gross Only - Includes Dues and Assessments

	Discount (Based on Gross Sales Vol.)		Discount (Based on Gross Sales Vol.)		Discount (Based on Gross Sales Vol.)		Discount (Based on Gross Sales Vol.)
Mastercard Qual Credit	%	Visa Qual Credit	%	Discover Network - PayPal Qual Credit	%	American Express OptBlue Qual Credit	%
Mastercard Qual Debit	%	Visa Qual Debit	%	Discover Network Qual Debit	%	American Express OptBlue has Program Pricing and not Interchange and are subject to change.	

Flat Rate			
	Discount Fee	MPG Rate	MPG Per Item
Mastercard Qualified Credit	%	%	\$
Mastercard Qualified Debit	%	%	\$
Visa Qualified Credit	%	%	\$
Visa Qualified Debit	%	%	\$
Discover Network - PayPal Qualified Credit	%	%	\$
Discover Network - PayPal Qualified Debit	%	%	\$
American Express OptBlue Qualified Credit	%	%	\$

Other Item Rate			
Mastercard Credit	\$	Visa Credit	\$
Mastercard Debit	\$	Visa Debit	\$
		Discover Network - PayPal Credit	\$
		Discover Network Debit	\$
		American Express OptBlue Credit	\$

Other Volume %			
Mastercard Credit	%	Visa Credit	%
Mastercard Debit	%	Visa Debit	%
		Discover Network - PayPal Credit	%
		Discover Network Debit	%
		American Express OptBlue Credit	%

**PIN Debit**  
 Pass Through Debit Network Fees    Other Item Rate \$ 0.29 (per item)    Other Volume Percent 1.25 % (per item)

**Fleet**  
**WEX:** Other Item Rate \$ 0.19 (per item)    **Voyager:** Qual 1.25 %    Other Item Rate \$ 0.19 (per item)

**TeleCheck**  
 In-Person Warranty     Mail Order Warranty     Single Hold Check Warranty     Multiple Hold Check Warranty     In-Person Paper Warranty     C.O.D. Warranty  
 SE # \_\_\_\_\_ Inquiry Rate \_\_\_\_\_ % Per TXN Fee \$ \_\_\_\_\_ Stmt/Processing Fee \$ 5.00 Dec. Risk Surcharge .10 %  
 Monthly Minimum Fee \$ \_\_\_\_\_ (Per Location)    Customer Requested Operator Call (CROC) \$ 2.50    Unauthorized Return Fee \$ 5.00

Miscellaneous Fees			
<input checked="" type="checkbox"/> Dues and Assessments	V/Mastercard Chargeback Fee (Per Item) \$ <u>29</u>	V/Mastercard Retrieval Fee (12B Letter) (Per Item) \$ <u>10</u>	Return Trans. Fee (Per Item) \$ <u>.29</u>
Sales Transaction Fee (Per Item) \$ <u>.10</u>	Batch Fee (Per Item) \$ <u>.29</u>	eIDS Access Fee (Flat Rate) \$ <u>29.95</u>	Other: _____
EBT - Food Stamps (Per Item) \$ <u>.19</u>	#: _____	EBT - Cash Benefits (Per Item) \$ <u>0.19</u>	<b>OffIn Dbt</b> \$ <u>0.09</u>
Minimum Monthly Fee \$ <u>29</u>	Monthly Statement Fee (Acct on File) \$ <u>9.95</u>	ACH Reject Fee (Per Item) \$ <u>29</u>	Pass Visa Trans Integrity Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

O_WF_R_2701	<b>7. SERVICE FEE SCHEDULE (cont'd)</b>			O_WF_R_2701
<b>Miscellaneous Fees (cont'd)</b>				
Mastercard License Fee (Per Sales Item) \$ _____		(Sales Volume) <b>0.008 %</b>		(Flat Rate) \$ _____ <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Annually in December
Visa Proc Fee (Per Item) \$ _____	Mastercard Proc Fee (Per Item) \$ _____	Visa BIN Fee (Per Item) \$ _____	Mastercard ICA Fee (Per Item) \$ _____	
Pass Visa Fixed Acquirer Network Fee (FANF) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa FANF Card Present Upcharge (Flat Rate) \$ _____		Visa FANF Card Not Present Upcharge (Flat Rate) \$ _____	
Pass Visa Acquirer Processing Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Visa Misuse of Auth Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Visa Zero Floor Limit Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Visa Int'l Acquirer Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Pass Mastercard Acquirer Support Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Mastercard Cross Border Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Discover Data Usage Charge <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Visa Acq ISA Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Pass Discover Int'l Processing Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Discover Int'l Service Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Discover Network Auth Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Mastercard Nat'l Acquirer Brand Usage (NABU) Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Authorization &amp; Capture Transaction Fees</b>			<b>First Data Payeezy Gateway Services</b>	
Mastercard/Visa Auth & Capture Fee: \$ <b>0.10</b> (per item)			<input type="checkbox"/> Payeezy Gateway Participation	
Discover Network PayPal Auth & Capture Fee: \$ <b>0.10</b> (per item)			Payeezy Gateway Effective Date: _____	
American Express OptBlue Auth & Capture Fee: \$ <b>0.10</b> (per item)			Payeezy Gateway One Time Setup Fee \$ <b>49</b> (one time)	
American Express Pass Through (existing) SE #: _____			Payeezy Gateway Monthly Fee \$ <b>9.95</b> (monthly)	
Voice Authorization \$ <b>1.50</b> (per item)			Payeezy Gateway Auth Fee \$ <b>0.05</b> (per item)	
Electronic AVS Fee \$ <b>0.10</b> (per item)			Payeezy Gateway AVS Fee \$ <b>0.02</b> (per item)	
Voice AVS Fee \$ <b>3.00</b> (per item)			Payeezy PayPal Auth Fee \$ <b>0.05</b> (per item)	
ARU Fee \$ <b>1.50</b> (per item)			Payeezy PayPal Sale Fee \$ <b>0.05</b> (per item)	
			Payeezy PayPal Return Fee \$ <b>.05</b> (per item)	
<b>First Data Payeezy Gateway Services Telecheck</b>				
Payeezy Gateway TeleCheck Auth Fee \$ _____ (per item)		Payeezy Gateway TeleCheck Deposit Fee \$ _____ (per item)		Payeezy Gateway TeleCheck Adjustment Fee \$ _____ (per item)
<b>User Defined Grid Fees</b>			<b>TIN/TFN &amp; Regulatory Product Fees</b>	
Wireless Monthly Service Fee \$ <b>15.00</b>	Supplies: _____ \$ _____	Reg. Product Fee (Monthly) \$ <b>7.95</b>		
AccessOne Fee \$ <b>4.95</b>	Other: _____ \$ _____	TIN/TFN Invalid (Monthly) \$ <b>11.75</b>		
Customer Service Fee \$ <b>2.99</b>	Other: _____ \$ _____	Website Usage (Per Item) \$ _____		
Debit Access Fee \$ _____	Other: _____ \$ _____			
<b>Merchant Fee Control Grid Fees</b>				
Annual Fee \$ <b>89</b>	Other: _____ \$ _____		Other: _____ \$ _____	
Month <b>December</b>	<input type="checkbox"/> Per item <input type="checkbox"/> Monthly <input type="checkbox"/> Annually Month _____		<input type="checkbox"/> Per item <input type="checkbox"/> Monthly <input type="checkbox"/> Annually Month _____	
Commercial Card Interchange Service Fee <b>75 %</b> (See Program Guide for details regarding Commercial Card Interchange Service.)				
Pass Visa BIN/ICA Fee (Note: this fee can be used for Shared Systems Only) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa BIN/ICA Fee Upcharge (Per Item) \$ _____			
Pass Visa Staged Digital Wallet Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa Staged Digital Wallet Fee Upcharge (Per Item) \$ _____			
Pass Visa B2B Virtual Service Fees <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Pass Visa File Transmission Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa File Transmission Transaction Fee Upcharge (Per Item) \$ _____			
Pass Visa Acquirer Credit Voucher Data Processing Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa Acquirer Credit Voucher Data Processing Fee Upcharge (Per Item) \$ _____			
Pass Visa Acquirer Data Processing International Return Fee Credit: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa Acquirer Data Processing International Return Fee Credit Upcharge (Per Item) \$ _____			
Pass Visa Acquirer Data Processing International Return Fee Debit: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa Acquirer Data Processing International Return Fee Debit Upcharge (Per Item) \$ _____			
Pass Visa AFD Non Participation Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa AFD Non Participation Fee Upcharge (Per Item) \$ _____			
Pass Visa International Acquirer Processing Fee Credit <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Visa International Acquirer Processing Fee Debit <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Pass Visa Account Verification International, Credit and Debit Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Pass Account Name Inquiry Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa Account Name Inquiry Fee Upcharge (Per Item) \$ _____			
Pass Visa APF Domestic Debit Auth Reversal Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Visa APF Domestic Credit Auth Reversal Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Pass Visa APF International Debit Auth Reversal Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Visa APF International Credit Auth Reversal Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Pass Visa Data Consistency Domestic Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Visa Excessive Auth Attempts Domestic & Cross Border Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Pass Visa Fallback US Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa Fallback US Fee Upcharge (Per Item) \$ _____			
Pass Visa Network Acquirer Processing (NAPF) Reversal Fees <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Pass Visa Consumer BillPay Participation Fee (Per Item) \$ _____	Visa Consumer BillPay Participation Fee Upcharge (Per Item) \$ _____			
Pass Visa Never Approve Reattempt Fees US <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Pass Visa Address Verification Fee US <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa Address Verification Service Fee US Upcharge (Per Item) \$ _____			
Pass Visa Integrity Detail Report Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa Integrity Detail Report Fee Upcharge (Per Item) \$ _____			
Pass Visa Recurring Auth Decline Fee US <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa Recurring Auth Decline Fee US Upcharge (Per Item) \$ _____			
Pass Visa Base 2 Returned Item Fee <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa Base 2 Returned Item Fee Upcharge (Per Item) \$ _____			

O_WF_R_2701		<b>7. SERVICE FEE SCHEDULE (cont'd)</b>		O_WF_R_2701
<b>Merchant Fee Control Grid Fees (cont'd)</b>				
Pass Visa Manual Cash Switch Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa Manual Cash Switch Fee Upcharge	(Per Item) \$ _____	
Pass Visa Magnetic Stripe Contactless Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa Magnetic Stripe Contactless Fee Upcharge	(Per Item) \$ _____	
Pass Visa CVV2 Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa CVV2 Fee Upcharge	(Per Item) \$ _____	
Pass Visa Estimated Auth Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa Estimated Auth Fee Upcharge	(Sales Volume) _____ %	
Pass Visa Incremental Auth Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa Incremental Auth Fee Upcharge	(Sales Volume) _____ %	
Pass Visa Digital Commerce Service Fee	(Sales Volume) _____ %			
Pass Visa Digital Commerce Service Fee Minimum	(Per Item) \$ _____			
Pass Discover Card Account Verification Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Discover Card Account Verification Fee Upcharge	(Per Item) \$ _____	
Pass Discover Network Auth Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Discover Network Auth Fee Upcharge	(Per Item) \$ _____	
Pass Discover Program Integrity Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Discover Program Integrity Fee Upcharge	(Per Item) \$ _____	
Pass Discover Account Verification Service Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Discover Account Verification Service Fee Upcharge	(Per Item) \$ _____	
Pass Discover Address Verification Service Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Discover Address Verification Service Fee Upcharge	(Per Item) \$ _____	
Pass Discover Digital Investment Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Discover Digital Investment Fee Upcharge	(Sales Volume) _____ %	
Pass Discover Ticket Retrieval Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Discover Ticket Retrieval Fee Upcharge	(Per Item) \$ _____	
Pass Discover Dispute Fee	(Per Item) \$ _____	Discover Retrieval Fee	(Per Item) \$ _____	
Pass PayPal Participation Authorization Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	PayPal Participation Authorization Fee Upcharge	(Sales Volume) _____ %	
Pass American Express OptBlue Access Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Pass American Express OptBlue Network Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	American Express OptBlue Network Fee Upcharge	(Sales Volume) _____ %	
Pass American Express OptBlue Acquirer Transaction Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	American Express OptBlue Acquirer Transaction Fee Upcharge	(Per Item) \$ _____	
Pass American Express OptBlue Dispute Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	American Express OptBlue Dispute Fee Total	(Per Item) \$ _____	
Pass American Express OptBlue Retrieval Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	American Express OptBlue Retrieval Fee Total	(Per Item) \$ _____	
Pass American Express OptBlue Program Continuation Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Pass Mastercard Processing Integrity Fee Pre Auth	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mastercard Processing Integrity Fee Pre Auth Upcharge	(Per Item) \$ _____	
Pass Mastercard Processing Integrity Fee Undefined Auth	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mastercard Processing Integrity Fee Undefined Auth Upcharge	(Per Item) \$ _____	
Pass Mastercard Processing Integrity Fee Final Auth %	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Mastercard Processing Integrity Fee Final Auth Minimum Per Item	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Pass Mastercard Processing Integrity Message Format Error Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mastercard Processing Integrity Message Format Error Fee Upcharge	(Per Item) \$ _____	
Pass Mastercard Processing Integrity Image Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mastercard Processing Integrity Image Fee Upcharge	(Per Item) \$ _____	
Pass Mastercard BIN/ICA Fee <i>(Note: this fee can be used for Shared Systems Only)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mastercard BIN/ICA Fee Upcharge	(Per Item) \$ _____	
Pass Mastercard Kilobyte Clearing US Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mastercard Kilobyte Clearing US Fee Upcharge	(Per Item) \$ _____	
Pass Mastercard Installment Purchase A, B and Refund A Fees	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Pass Mastercard Decline Service Fee US	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mastercard Decline Service Fee US Upcharge	(Per Item) \$ _____	
Pass Mastercard ICA AVS Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mastercard ICA AVS Fee Upcharge	(Per Item) \$ _____	
Pass Mastercard Digital Enablement Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mastercard Digital Enablement Fee Upcharge	(Sales Volume) _____ %	
Pass Mastercard Business to Business US Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mastercard Business to Business US Fee Upcharge	(Sales Volume) _____ %	
Pass Mastercard SecureCode Transaction Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mastercard SecureCode Transaction Fee Upcharge	(Flat Rate) \$ _____	
Pass Mastercard Location Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mastercard Location Fee Upcharge	(Flat Rate) \$ _____	
Pass Mastercard ACQ Interchange Downgrade Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mastercard ACQ Interchange Downgrade Fee Upcharge	(Per Item) \$ _____	
Pass Mastercard Excessive Auth Attempts US Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mastercard Excessive Auth Attempts US Fee Upcharge	(Per Item) \$ _____	
Pass Mastercard ACQ Freight Program Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mastercard ACQ Freight Program Fee Upcharge	(Sales Volume) _____ %	
Pass Mastercard Credential Continuity Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mastercard Credential Continuity Fee Upcharge	(Per Item) \$ _____	
Pass Mastercard Nominal Auth Amount US Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mastercard Nominal Auth Amount US Fee Upcharge	(Per Item) \$ _____	
Pass Mastercard Merchant Advice Code US Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mastercard Merchant Advice Code US Fee Upcharge	(Per Item) \$ _____	
Pass Mastercard Preauthorization Card Present Fee US	(Sales Volume) _____ %			
Pass Mastercard Preauthorization Card Present Fee Minimum US	(Per Item) \$ _____			
Pass Mastercard Preauthorization Card Not Present Fee US	(Sales Volume) _____ %			



O_WF_R_2701		<b>7. SERVICE FEE SCHEDULE (cont'd)</b>		O_WF_R_2701	
<b>Merchant Fee Control Grid Fees (cont'd)</b>					
Pass Mastercard Preauthorization Card Not Present Fee Minimum US	(Per Item) \$ _____				
Pass Retrieval Received Fax/Mail Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Retrieval Received Fax/Mail Fee Upcharge	(Per Item) \$ _____		
Pass Chargeback Received Fax/Mail Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Chargeback Received Fax/Mail Fee Upcharge	(Per Item) \$ _____		
Pass Retrieval Outgoing Fax/Mail Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Retrieval Outgoing Fax/Mail Fee Upcharge	(Per Item) \$ _____		
Pass Chargeback Outgoing Fax/Mail Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Chargeback Outgoing Fax/Mail Fee Upcharge	(Per Item) \$ _____		
Pass Visa Accept/No Accept Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa Accept/No Accept Fee Upcharge	(Per Item) \$ _____		
Pass Visa Accept 0-20 US Fees	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa Accept 0-20 US Fees Upcharge	(Per Item) \$ _____		
Pass Visa Dispute Accept 21-25 Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Visa Merchant Response 0-20 Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Pass Visa Dispute Accept 26-30 Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Visa Merchant Response 21-25 Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Pass Visa Dispute No Acceptance Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Visa Merchant Response 26-30 Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Pass Visa Retrieval Fulfillment Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Visa Case Filing Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Pass Visa Retrieval Non-Fulfillment Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Visa Lost Case Filing Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Pass Visa Auto Acceptance Fee	(Per Item) \$ _____				
Pass Visa Prearbitration with Qualified Remedy Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa Prearbitration with Qualified Remedy Fee Upcharge	(Per Item) \$ _____		
Pass Mastercard Accept/No Accept Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mastercard Accept/No Accept Fee Upcharge	(Per Item) \$ _____		
Pass Mastercard Prearbitration Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Pass Mastercard Case Filing Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Mastercard Case Withdrawal Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Pass Mastercard Lost Case Filing Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Pass Discover Accept/No Accept Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Discover Accept/No Accept Fee Upcharge	(Per Item) \$ _____		
Pass Discover Lost Case Filing Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Pass Discover Inquiry Request No Response Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Discover Inquiry Request No Response Fee Upcharge	(Per Item) \$ _____		
Pass Discover Representment Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Discover Representment Fee Upcharge	(Per Item) \$ _____		
Pass American Express Accept/No Accept Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	American Express Accept/No Accept Fee Upcharge	(Per Item) \$ _____		
Pass Dispute Case Mastercard DMS Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Dispute Case Mastercard DMS Fee Upcharge	(Per Item) \$ _____		
Pass Dispute Image Mastercard DMS Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Mastercard Presentment Excessive Pages Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Pass Dispute Image Visa DMS Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Dispute Image Visa DMS Fee Upcharge	(Per Item) \$ _____		
Pass Visa Pre-Compliance Image Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pass Visa Incoming Pre-Dispute DMS Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Pass Visa Late Response to Dispute Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Visa Late Response to Dispute Fee Upcharge	(Per Item) \$ _____		
Pass Mastercard Late Response to Dispute Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mastercard Late Response to Dispute Fee Upcharge	(Per Item) \$ _____		
Pass Discover Late Response to Dispute Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Discover Late Response to Dispute Fee Upcharge	(Per Item) \$ _____		
Pass American Express Late Response to Dispute Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	American Express Late Response to Dispute Fee Upcharge	(Per Item) \$ _____		
NW Refund Request Response Mastercard-DMS Tier 1	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
NW Refund Request Response Mastercard-DMS Tier 2	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
NW Collaboration ADJ Mastercard-DMS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Pass STAR Debit Network Annual Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	STAR Debit Network Annual Fee Upcharge	(Flat Rate) \$ _____		
Pass Pulse Debit Network Annual Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pulse Debit Network Annual Fee Upcharge	(Flat Rate) \$ _____		
Pass NYCE Debit Network Annual Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	NYCE Debit Network Annual Fee Upcharge	(Flat Rate) \$ _____		
Pass Accel Debit Network Annual Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Accel Debit Network Annual Fee Upcharge	(Flat Rate) \$ _____		
Pass Culliance Network Annual Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Culliance Network Annual Fee Upcharge	(Flat Rate) \$ _____		
Pass Interlink System Integrity Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Interlink System Integrity Fee Upcharge	(Per Item) \$ _____		
Pass Interlink EMV Fallback Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Interlink EMV Fallback Fee Upcharge	(Per Item) \$ _____		
Pass STAR Token Fee	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	STAR Token Fee Upcharge	(Per Item) \$ _____		
Pass NACHA Unauthorized Entry Fee	(Per Item) \$ <b>4.50</b>	NACHA Unauthorized Entry Fee Upcharge	(Per Item) \$ _____		
Pass Ingenico Monthly Management Fee	(Flat Rate) \$ _____	Ingenico Monthly Management Fee Upcharge	(Flat Rate per month) \$ _____		
Other Fees	(Other) \$ _____	Other Fees	(Other) \$ _____		

O_WF_R_2701	<b>7. SERVICE FEE SCHEDULE (cont'd)</b>		O_WF_R_2701
<b>Security &amp; Compliance Fees</b>			
Clover Security Plus	(Flat Rate per month) \$ <b>15.95</b>	PCI Rapid Comply	(Flat Rate per month) \$ _____
PCI Rapid Comply (Compliance) & Liability Waiver	(Flat Rate per month) \$ _____	Merchant Opted Out	<input type="checkbox"/> Yes
Data Protection Only	(Flat Rate per month) \$ _____	Clover Security Essentials	(Flat Rate per month) \$ _____
Pass PCI Non Compliance Fee (Monthly)	(Flat Rate) \$ _____	TransArmor Terminal	(Flat Rate) \$ <b>5.00</b>
<b>Clover Fees</b>			
Platform Access Monthly Fee	(Flat Rate) \$ <b>9.95</b>	Clover Non-Swiped Authorization Fee	(Per Item) \$ <b>0.05</b>
Clover Go Monthly Fee (per MID)	(Flat Rate) \$ <b>6.00</b>		
Wireless Monthly Service Fee	(Flat Rate) \$ <b>15.00</b>	Wireless Activation Fee	(Flat Rate) \$ _____

**CONTINUED ON NEXT PAGE**

O\_WF\_R\_2701 **8. EQUIPMENT/THIRD PARTY INFORMATION** O\_WF\_R\_2701

Network (Front End):  Omaha  North  Nashville  Buypass  
 Do you use any third party to store, process or transmit cardholder data?  Yes  No  
 If yes, identify the Third Party Processor used:  00 None  01 Yahoo  02 Authorize.net  03 Cybersource  04 Verifone  05 Merchant Link  06 Shift 4  
 08 FIS  09 Six Payment Services Corp  10 Verisign  99 Other (please specify) \_\_\_\_\_

INTERNET GATEWAY:  First Data Global Gateway  Other: \_\_\_\_\_

Wireless Network: \_\_\_\_\_  
 PC/Internet Software \_\_\_\_\_ Quantity \_\_\_\_\_  New  Rent  Purchase<sup>1</sup>  Lease<sup>2</sup>  Existing  
 Terminal Model \_\_\_\_\_ Quantity \_\_\_\_\_  New  Rent  Purchase<sup>1</sup>  Lease<sup>2</sup>  Existing  
 Printer Model \_\_\_\_\_ Quantity \_\_\_\_\_  New  Rent  Purchase<sup>1</sup>  Lease<sup>2</sup>  Existing  
 PIN Pad \_\_\_\_\_ Quantity \_\_\_\_\_  New  Rent  Purchase<sup>1</sup>  Lease<sup>2</sup>  Existing

<sup>1</sup> Clover Equipment Purchase Only: This is for information purposes only. Please refer to your equipment purchase agreement with POS Equipment Service Inc. for information and pricing and fees for your equipment or hardware. You are not purchasing equipment from Processor and you acknowledge and agree that Processor will have no obligation or liability relating to such purchase of equipment. Your purchase of equipment is subject to separate terms and conditions between you and the equipment seller.  
<sup>2</sup> See Equipment Lease Agreement for the Terms and Conditions governing your leased equipment.

**Early Termination Fee \$ 695** The initial term of this Agreement is three years from the date of your approval by our Credit Department (the Initial Term). If you terminate this Agreement before the end of the then current term or otherwise stop processing your transactions with us, you will be charged this Early Termination Fee. After the Initial Term, subject to Part IV, Section A.3, this Agreement will automatically renew for successive 30 day periods. **Merchant Initials** \_\_\_\_\_

**9. SIGNATURE(S)**

Client certifies that all information set forth in this completed Merchant Processing Application is true and correct and that Client has received a copy of the Program Guide and Confirmation Page, which is part of this Merchant Processing Application (consisting of Sections 1-9), and by this reference incorporated herein. Client acknowledges and agrees that we, our Affiliates and our third party subcontractors and/or agents may use automatic telephone dialing systems to contact Client at the telephone number(s) Client has provided in this Merchant Processing Application and/or may leave a detailed voice message in the event that Client is unable to be reached, even if the number provided is a cellular or wireless number or if Client has previously registered on a Do Not Call list or requested not to be contacted Client for solicitation purposes. Client hereby consents to receiving commercial electronic mail messages from us, our Affiliates and our third party subcontractors and/or agents from time to time. Client further agrees that Client will not accept more than 20% of its card transactions via mail, telephone or Internet order. However, if your Application is approved based upon contrary information stated in Section 5, Transaction Information section above, you are authorized to accept transactions in accordance with the percentages indicated in that section. This signature page also serves as a signature page to the TeleCheck Solutions Agreement appearing in the Third Party Section of the Program Guide, if selected, the undersigned Client being "You" and "Your" for the purposes of the TeleCheck Solutions Agreement.

On behalf of myself as an individual, the entity on whose behalf I am signing, and its principals (collectively, the Client Parties),(A) I authorize Processor, Servicers, the applicable Payment Networks, and its and their Affiliates, third party subcontractors, service providers, and/or agents: (i) to use, disclose, and exchange amongst them and externally with other third-parties, the information in the Agreement and information about each of the Client Parties, (including by requesting and sharing, personal and business consumer reports, bank references, and other information as necessary from time to time), for marketing and administrative purposes, verification purposes, purposes under the Merchant Processing Application and Agreement (MPA), if approved, product improvement, fraud, analytics and any other purposes permitted by law (and to continue to use and share such information following the termination of this Agreement); (ii) to inform me directly about the contents of requested consumer reports (including the name and address of the agency furnishing the report), and (ii) to receive any and all personal and business credit financial information from all references, including banks and consumer reporting agencies, which are hereby released to provide that information; and (B) I certify that: (i) The federal taxpayer identification number and corresponding filing name provided herein are correct; (ii) The statements made and agreed to in this MPA, to which I have not made any alterations or stricken out any language, are true, complete and accurate, and may be relied upon as current unless changed or updated per the Notice provisions of Agreement; (iii) I can read and understand the English language; (iv) I have received and read a copy of the (a) MPA (consisting of Sections 1-9), (b) Program Guide, (c) Confirmation Page (version O\_WF\_R\_2701), and (v) I have authority to bind the entity on whose behalf I am signing below and have the appropriate consents and authority from each of the Client Parties (whether individuals or other entities) to authorize the use and sharing of data described above. Processor's privacy notice is available at [www.fiserv.com/privacy](http://www.fiserv.com/privacy).

Client authorizes FDMS and Bank and their affiliates to debit Client's designated bank account via Automated Clearing House (ACH) for costs associated with equipment hardware, software and shipping.

You further acknowledge and agree that you will not use your merchant account and/or the Services for illegal transactions, for example, those prohibited by the Unlawful Internet Gambling Enforcement Act, 31 U.S.C. Section 5361 et seq, as may be amended from time to time, or processing and acceptance of transactions in certain jurisdictions pursuant to 31 CFR Part 500 et seq. and other laws enforced by the Office of Foreign Assets Control (OFAC). To help the government fight the funding of terrorism and money laundering activities, Servicers obtain, verify, and record certain information including your full name, physical address, and any other information needed for identity verification purposes while processing this MPA, as described in the USA Patriot Act.

**Client certifies, under penalties of perjury, that the federal taxpayer identification number and corresponding filing name provided herein are correct. Client agrees to all the terms of this Merchant Processing Application and Agreement. This Merchant Processing Application and Agreement will not take effect until Client has been approved and this Agreement has been accepted by Processor and Bank. Acceptance by Processor and Bank will occur upon the earlier of the execution of this Merchant Processing Application and Agreement by Processor and Bank, or the commencement of the provision of the Services by Processor and Bank.**

**Client's Authorized Signer:**

Signature X \_\_\_\_\_ Title \_\_\_\_\_  
 Print Name of Signer \_\_\_\_\_ Date \_\_\_\_\_

**Processor:** First Data Merchant Services LLC  
 Signature X \_\_\_\_\_ Title: \_\_\_\_\_  
 Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_  
**Bank:** Wells Fargo Bank, N.A.  
 (a member of Visa USA, Inc. and Mastercard International, Inc.)  
 By: First Data Merchant Services LLC, pursuant to a limited power of attorney  
 Signature X \_\_\_\_\_ Title: \_\_\_\_\_  
 Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

**TELECHECK ACH AUTHORIZATION**

**ACH Debit and Credit Authorization:** Client authorizes its Financial Institution to pay and charge to its account the amount(s) due TeleCheck under this TeleCheck Agreement and to accept all credits and debits made to its account by TeleCheck via electronic funds transfer in connection with TeleCheck's services under this TeleCheck Agreement. This authorization shall remain in effect until (30) thirty days after revoked in writing.

Signature X \_\_\_\_\_ Print Name/Title: \_\_\_\_\_ Date \_\_\_\_\_  
 Authorized Signature on TeleCheck Account for ACH

**Personal Guarantee:** In exchange for First Data Merchant Services LLC, Wells Fargo Bank, N.A., (a member of Visa USA, Inc. and Mastercard International, Inc.), and TeleCheck Services, LLC, (the Guaranteed Parties) acceptance of the MPA, the Agreement, and/or the Equipment Agreement and/or the TeleCheck/TRS Solutions Agreement, the undersigned (Guarantor): (A) Unconditionally and irrevocably guarantees the full payment and performance of Client's obligations (i) as they now exist or as modified under the foregoing agreements, (ii) with or without actual notice of changes, and (iii) during and after the term of the agreements; (B) Waives notice of Merchant's default; (C) Shall indemnify the Guaranteed Parties for any and all amounts due from Client; (D) Warrants, with knowledge that Guaranteed Parties are acting in full reliance on the same, this Personal Guarantee of payment, and not of collection; (E) Acknowledges that (i) the Guaranteed Parties may proceed in law directly against Guarantor and not Client, (ii) this is a continuing personal guarantee and shall not be discharged or affected for any reason, and (iii) information about the Guarantor as one of the Client Parties may be used and shared as set forth in Section 9.

**Personal Guarantee Signature X** \_\_\_\_\_ Print Name: \_\_\_\_\_ Date \_\_\_\_\_  
**Personal Guarantee Signature X** \_\_\_\_\_ Print Name: \_\_\_\_\_ Date \_\_\_\_\_

Part 1: Confirmation Page

Processor Information:

Name: First Data Merchant Services LLC
Address: 4000 NW 120th Avenue, Coral Springs, FL 33065
URL: merchants.fiserv.com Customer Service #: 1-800-858-1166

Please read the program guide in its entirety. It describes the terms under which we will provide merchant processing Services to you. From time to time you may have questions regarding the contents of your Agreement with Bank and/or Processor or the contents of your Agreement with TeleCheck. The following information summarizes portions of your Agreement in order to assist you in answering some of the questions we are most commonly asked.

- 1. Your Discount Rates and other fees and charges are calculated based on transactions qualifying for certain program pricing and interchange rates levied by the applicable Payment Network.
2. We may debit your bank account (also referred to as your Settlement Account) from time to time for amounts owed to us under the Agreement.
3. There are many reasons why a Chargeback may occur. When they occur we will debit your settlement funds or Settlement Account.
4. In consideration of the Services provided by us, you shall be charged, and hereby agree to pay us any and all fees set forth in this Agreement.
5. The Agreement limits our liability to you. For a detailed description of the limitation of liability see Section 27, 38.3, and 39.9 of the Card General Terms; or Section 17 of the TeleCheck Solutions Agreement.
6. We have assumed certain risks by agreeing to provide you with Card processing or check services. Accordingly, we may take certain actions to mitigate our risk, including termination of the Agreement, and/or hold monies otherwise payable to you.
7. By executing this Agreement with us you are authorizing us and our Affiliates to obtain financial and credit information regarding your business and the signers and guarantors of the Agreement until all your obligations to us and our Affiliates are satisfied.
8. The Agreement contains a provision that in the event you terminate the Agreement prior to the expiration of your initial 3 year term, you will be responsible for the payment of an early termination fee as set forth in Part 4, A.3 under "Additional Fee Information" and Section 6.2 of the TeleCheck Solutions Agreement.
9. For questions or concerns regarding your merchant account, contact customer service at the number located on your Merchant Services Statement.

10. Payments Network Disclosure

Visa and Mastercard Member Bank Information: Wells Fargo Bank, N.A.

The Bank's mailing address is P.O. Box 6079, Concord, CA 94524, and its phone number is 1-844-284-6834.

Important Member Bank Responsibilities:

- a) The Bank is the only entity approved to extend acceptance of Visa and Mastercard products directly to a merchant.
b) The Bank must be a principal (signer) to the Agreement.
c) The Bank is responsible for educating merchants on pertinent Visa and Mastercard rules with which merchants must comply; but this information may be provided to you by Processor.
d) The Bank is responsible for and must provide settlement funds to the merchant.
e) The Bank is responsible for all funds held in reserve that are derived from settlement.
f) The Bank is the ultimate authority should a merchant have any problems with Visa or Mastercard products (however, Processor also will assist you with any such problems).

Important Merchant Responsibilities:

- a) Ensure compliance with Cardholder data security and storage requirements.
b) Maintain fraud and Chargebacks below Payments Network thresholds.
c) Review and understand the terms of the Merchant Agreement.
d) Comply with Payments Network Rules and applicable law and regulations.
e) Retain a signed copy of this Disclosure Page.
f) You may download Visa Regulations from Visa's website at: https://usa.visa.com/content/dam/VCOM/download/about-visa/visa-rules-public.pdf.
g) You may download Mastercard Regulations from Mastercard's website at: https://www.mastercard.us/content/dam/public/mastercardcom/na/global-site/documents/mastercard-rules.pdf.
h) You may download American Express Merchant Operating Guide from American Express' website at: www.americanexpress.com/us/merchant.

Print Client's Business Legal Name:

By its signature below, Client acknowledges that it has received the Merchant Processing Application, Program Terms and Conditions consisting of 51 pages including this Confirmation Page and the applicable Third Party Agreement(s).

Client further acknowledges reading and agreeing to all terms in the Program Terms and Conditions. Upon receipt of a signed facsimile or original of this Confirmation Page by us, Client's Application will be processed.

No alterations or strikeouts to the program terms and conditions will be accepted.

Client's Principal Signature: (Please sign below)

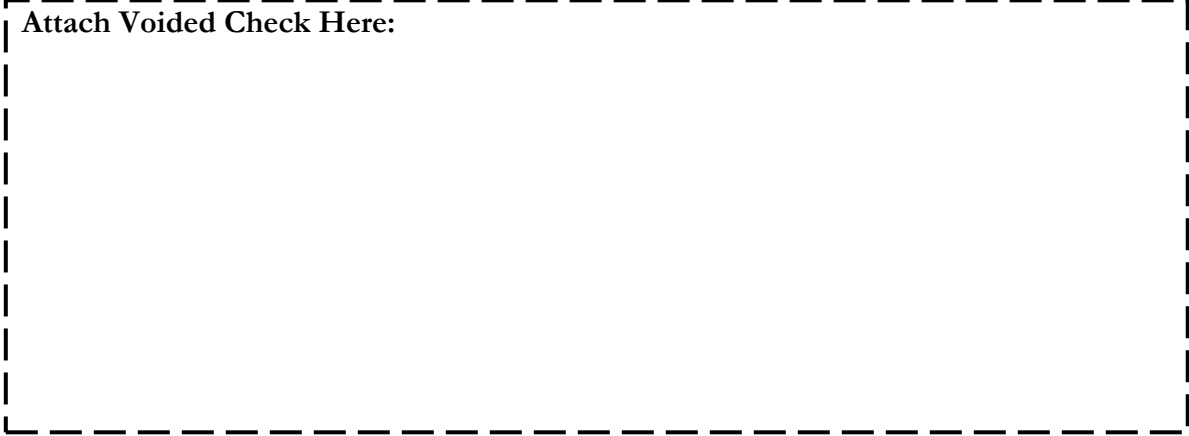
X Title Date

Please Print Name of Signer

**BE SURE TO ATTACH VOIDED CHECK**

**THIS IS THE ACCOUNT WHERE MERCHANT WANTS  
CREDIT CARD FUNDS DEPOSITED**

Attach Voided Check Here:



# Request for Taxpayer Identification Number and Certification

**Give Form to the  
 requester. Do not  
 send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	<p><b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p> <hr/> <p><b>2</b> Business name/disregarded entity name, if different from above</p> <hr/> <p><b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.</p> <p> <input type="checkbox"/> Individual/sole proprietor or single-member LLC                  <input type="checkbox"/> C Corporation                  <input type="checkbox"/> S Corporation                  <input type="checkbox"/> Partnership                  <input type="checkbox"/> Trust/estate         </p> <p> <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____         </p> <p><b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</p> <p> <input type="checkbox"/> Other (see instructions) ▶ _____         </p>	<p><b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p style="font-size: small;">(Applies to accounts maintained outside the U.S.)</p>
	<p><b>5</b> Address (number, street, and apt. or suite no.) See instructions.</p> <hr/> <p><b>6</b> City, state, and ZIP code</p> <hr/> <p><b>7</b> List account number(s) here (optional)</p>	<p>Requester's name and address (optional)</p> <hr/>

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black;"> </td> <td style="width: 25%; border: 1px solid black;"> </td> <td style="width: 25%; border: 1px solid black;"> </td> <td style="width: 25%; border: 1px solid black;"> </td> </tr> <tr> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> </tr> </table>					-	-	-	-
-	-	-	-					
<b>or</b>								
<b>Employer identification number</b>								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black;"> </td> <td style="width: 25%; border: 1px solid black;"> </td> <td style="width: 25%; border: 1px solid black;"> </td> <td style="width: 25%; border: 1px solid black;"> </td> </tr> <tr> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> </tr> </table>					-	-	-	-
-	-	-	-					

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
------------------	----------------------------	--------

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

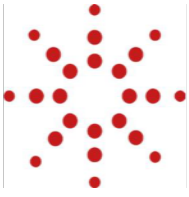
### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*



# Imagine, every time you accept a card a non-profit gets a donation.

Nobody pays extra. The money already exists. Simple. Powerful.



*You Choose!*

1. Select FFUSA as your payment processor

Your Business Name \_\_\_\_\_

2. Select your non-profit\*

Organization Name \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_

[ ] Check here if a non-profit doesn't come to mind and we will

allocate a portion\*\* of the fee you already pay to:



*Simon Says Give* is a kid founded and kid operated non-profit, founded by Mandi Simon when she was just 7 years-old. Mandi wanted to make a difference in the lives of other kids. Their Kid Advisory Board, the KAB, drives them to reach their goal to impact 2 million kids by 2022, while they build the next generation of leaders to be unstoppable. Learn more at [w1vw.simonsaysgive.org](http://w1vw.simonsaysgive.org). "It's a no-brainer." - Rotary Club President

#### More about FFUSA:

In business 25 years, invented the Giveback in 2005 to help the local Rotary Club raise money. Now giving to 751 (and counting) non-profits nationwide. Voted Best Places to Work 8 years running. [www.ffusa.com](http://www.ffusa.com) for more info. "If there's ever been a time that we need the money, it's now." - Minister

**Who else do you know that would like to see your organization benefit like you did today?**

**Refer another merchant and another and another...**

**The more cards accepted the more donation they receive. There is no limit.**

**Fax to 763.225.0039 or email [giveback@ffusa.com](mailto:giveback@ffusa.com)**

\* Non-profit must be a registered 5013c and subject to FFUSA's internal approval process.

\*\* Typical contribution is approximately 5basis points on total card processing volume. Contributions made to non-profit quarterly by check. Non-profit does receive notification and can see that your business is supporting them.