

MERCHANT PROCESSING APPLICATION AND AGREEMENT



Sales Office _____ Print Sales Rep Name _____ Sales ID# _____
 Merchant Number _____ Sales Rep. Signature _____ Phone #: _____ Page 1 of 4

I. BUSINESS INFORMATION

Client's Business Name (<i>Doing Business As</i>):			Client's Corporate/Legal Name (<i>Use Also For Headquarter's Information</i>):		
Business Address:			Billing Address (<i>If Different Than Location Address</i>):		
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 #:		
Customer Service Phone #:	Customer Service E-mail Address:		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		
<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 (<i>as it appears on your income tax return</i>)		FEDERAL TAX ID # (<i>as it appears on your income tax return</i>)		<input type="checkbox"/> I certify that I am a foreign entity/nonresident alien. (<i>If checked, please attach IRS Form W-8.</i>)	

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: _____	Detailed Explanation of Type of Merchandise, Products or Services Sold:
IATA/ARC: _____ (MCC 4722 Only)	

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"/> Mail <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 MC/Visa/Discover® Network/ American Express/ American Express OnePoint Sales? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, check one: <input type="checkbox"/> Exchange <input type="checkbox"/> Store Credit <input type="checkbox"/> MC/V/Discover Network/American Express/ American Express OnePoint Credit. If MC/V/Discover Network/American Express/ American Express OnePoint 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 (<i>Attach at least one</i>): <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 style="text-align: center;">Mail / Telephone Order / Business to Business / Internet Information (All Questions must be Answered)</p> <p>1. What % of total sales represent business to business (<i>vs business to consumer</i>): Business to Business _____% + Business to Consumer _____% = 100% (total sales)</p> <p>2. What % of bankcard sales represent business to business (<i>vs business to consumer</i>): Business to Business _____% + Business to Consumer _____% = 100% (total sales)</p> <p>3. What is the time frame from transaction to delivery? (<i>% of orders delivered in</i>): 0-7 days _____% + 8-14 days _____% + 15-30 days _____% + over 30 days _____% = 100%</p> <p>4. MC/Visa/Discover Network/American Express/ American Express OnePoint sales are deposited (<i>check one</i>): <input type="checkbox"/> Date of order <input type="checkbox"/> Date of delivery <input type="checkbox"/> Other (<i>specify</i>): _____</p> <p>5. Who performs product / service fulfillment? <input type="checkbox"/> Direct <input type="checkbox"/> Vendor <input type="checkbox"/> Other If vendor, add Name: _____ Address: _____ City: _____ State: _____ Zip: _____ Phone: _____ Please describe how the transaction works, from order taking to merchant fulfillment (<i>attach additional sheet if necessary</i>): _____ _____ _____</p> <p>6. Does any of your cardholder billing involve automatic renewals or recurring transactions (<i>i.e., cardholder authorizes initial sale only</i>)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
--	--

Merchant Initials: _____

3. COMPANY HISTORY

Date Business Started: _____ Prior Bankruptcies? No Yes Business and / or Personal

4. OWNERS / PARTNERS / OFFICERS

OWNER / PARTNER / OFFICER 1				OWNER / PARTNER / OFFICER 2			
Name: (First, MI, Last)		% Ownership:		Name: (First, MI, Last)		% Ownership:	
Title:				Title:			
Home Address: (No P.O. Box)				Home Address: (No P.O. Box)			
City:	State:	Zip:	Country:	City:	State:	Zip:	Country:
Telephone #:		Social Security #:		Telephone #:		Social Security #:	
D.O.B.:	DL #:	State:		D.O.B.:	DL #:	State:	

5. SETTLEMENT INFORMATION

Deposit Bank: _____ Bank Contact: _____
 Transit / ABA #: _____ Deposit Account #: _____
 ACH Detail Flag: Individual Combined Separate (defaults to Combined if option not selected)

6. EQUIPMENT/THIRD PARTY INFORMATION

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
 07 Apriva 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 Lease Existing
 Terminal Model _____ Quantity _____ New Rent Lease Existing
 Printer Model _____ Quantity _____ New Rent Lease Existing
 PIN Pad _____ Quantity _____ New Rent Lease Existing

LEASE COMPANY: (04) First Data Global Leasing Lease Term: _____ Mos. Annual Tax Handling Fee: 10.20
Total Monthly Lease Charge: \$ _____ w/o taxes, late fees, or other charges that may apply - See Lease Agreement in Program Guide for details.
This is a non-cancelable lease for the full term indicated.)

Address _____ City _____ State _____ Zip _____ Attention: _____

7. GRID INFORMATION - INTERNAL USE ONLY

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

8. TRANSACTION INFORMATION

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

9. SERVICE FEE SCHEDULE

Accept all MasterCard, Visa and Discover Network Transactions (presumed, unless any selections below are checked)

<p>MasterCard</p> <input type="checkbox"/> MC Credit Transactions <input type="checkbox"/> MC Non-PIN Debit Trans.	<p>Visa</p> <input type="checkbox"/> Visa Credit Transactions <input type="checkbox"/> Visa Non-PIN Debit Trans.	<p>Discover Network</p> <input type="checkbox"/> Discover Network Credit Transactions <input type="checkbox"/> Discover Network Non-PIN Debit Trans.
--	--	--

See Section 1.9 of the Program Guide for details regarding limited acceptance.

Discount Collected Daily Monthly

Merchant Initials: _____

9. SERVICE FEE SCHEDULE (cont'd)

Authorization & Capture Transaction Fees

MC/Visa Auth & Capture Fee: \$ _____ (Per Item)	Discover Network Auth & Capture Fee: \$ _____ (Per Item)	TransArmor Auth Fee \$ _____ (Per Item)
<input type="checkbox"/> American Express OnePoint/Full Service (EDC)		Voice Authorization \$ _____ (Per Item)
<input type="checkbox"/> American Express or <input type="checkbox"/> American Express ESA/Pass Through*		Electronic AVS Fee \$ _____ (Per Item)
American Express Auth & Capture Fee: \$ _____ (Per Item)	American Express ESA/Pass Through SE #:	Voice AVS Fee \$ _____ (Per Item)
American Express Discount Rate _____ %	Flat Per Transaction Fee \$ _____	ARU Fee \$ _____ (Per Item)
American Express Prepaid Discount Rate _____ %	Flat Per Transaction Fee \$ _____	
<input type="checkbox"/> American Express Monthly Fee*: \$ 7.95 (Flat Fee)		
*American Express Monthly Flat Fee or Discount Rate may apply.		

Miscellaneous Fees

<input type="checkbox"/> Dues and Assessments	Chargeback Fee \$ _____ (Per Item)	Retrieval Fee (12B Letter) \$ _____ (Per Item)	Return Trans. Fee \$ _____ (Per Item)	Monthly Fees	
Sales Transaction Fee \$ _____ (Per Item)	Batch Fee \$ _____ (Per Item)	Early Termination Fee \$ _____ (One Time Fee)	Wireless Fee \$ _____	Portfolio Mgr Fee \$ _____	
EBT - Food Stamps \$ _____ (Per Item) #:	EBT - Cash Benefits \$ _____ (Per Item)	Other: \$ _____	eMerchantView Access Fee \$ _____	Customer Service Fee \$ _____	
Minimum Monthly Fee \$ _____	Monthly Statement Fee \$ _____ (Acct on File)	Pass Visa Trans Integrity Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	ACH Reject Fee \$ _____ (Per Item)	Debit Access Fee \$ _____	
MC License Fee \$ _____ (Per Sales Item)	_____ % (Sales Volume)	\$ _____ (Flat Rate)	<input type="checkbox"/> Monthly <input type="checkbox"/> Annually in December	eIDS Access Fee \$ _____	
Visa Proc Fee \$ _____ (Per Item)	MC Proc Fee \$ _____ (Per Item)	Visa BIN Fee \$ _____ (Per Item)	MC ICA Fee \$ _____ (Per Item)	Supplies: _____ \$ _____	
Pass Visa Fixed Acquirer Network Fee (FANF) <input type="checkbox"/> Yes <input type="checkbox"/> No	Visa FANF Card Present Surcharge \$ _____ (Flat Rate)	Visa FANF Card Not Present Surcharge \$ _____ (Flat Rate)		Other: _____ \$ _____	
Pass Visa Acq Processing Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	Pass Visa Misuse of Auth Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	Pass Visa Zero Floor Limit Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	Pass Visa Int'l Acquirer Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	Annual Fee \$ _____	
Pass Visa Kilobyte Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	Visa Kilobyte Fee Surcharge \$ _____ (Flat Rate)	Pass Visa AFD Non Participation Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	Visa AFD Non Participation Fee Surcharge \$ _____ (Per Item)	Month _____	
Pass MasterCard Kilobyte Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	MasterCard Kilobyte Fee Surcharge \$ _____ (Flat Rate)	Pass MasterCard AVS Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	MasterCard AVS Fee Surcharge \$ _____ (Per Item)	Other: _____ \$ _____	
Pass MasterCard CVC2 Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	MasterCard CVC2 Fee Surcharge \$ _____ (Flat Rate)	American Express Network Fee Surcharge _____ % (Sales Volume)		Annual Fee \$ _____	
Pass American Express Network Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	Discover Network Auth Fee Surcharge \$ _____ (Flat Rate)	Discover Network Auth Fee Surcharge \$ _____ (Flat Rate)		Month _____	
Pass Discover Network Auth Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	Pass Visa Acq ISA Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	Pass MC Acquirer Support Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	Pass MC Cross Border Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	Other: _____ \$ _____	
Pass Visa Acq Int'l Proc Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	Pass MC Nat'l Acquirer Brand Usage (NABU) Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	Pass Discover Int'l Service Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	Pass Discover Data Usage Charge <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Per item	
Pass STAR Debit Network Annual Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	STAR Debit Network Annual Fee Surcharge \$ _____ (Flat Rate)	STAR Debit Network Annual Fee Surcharge \$ _____ (Flat Rate)		<input type="checkbox"/> Monthly	
Pass Pulse Debit Network Annual Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	Pulse Debit Network Annual Fee Surcharge \$ _____ (Flat Rate)	Pulse Debit Network Annual Fee Surcharge \$ _____ (Flat Rate)		<input type="checkbox"/> Annually	
Pass Jeanie Debit Network Annual Fee <input type="checkbox"/> Yes <input type="checkbox"/> No	Jeanie Debit Network Annual Fee Surcharge \$ _____ (Flat Rate)	Jeanie Debit Network Annual Fee Surcharge \$ _____ (Flat Rate)		Month _____	

TIN/TFN & Regulatory Product Fees

Reg. Product Fee \$ _____ (Monthly)	TIN/TFN Invalid \$ _____ (Monthly)	Website Usage \$ _____ (Per Item)	IVR Usage \$ _____ (Per Item)
-------------------------------------	------------------------------------	-----------------------------------	-------------------------------

Other Item Rate

MC Credit \$ _____	Visa Credit \$ _____	Discover Network Credit \$ _____	American Express Credit \$ _____	American Express One Point Credit \$ _____
MC Debit \$ _____	Visa Debit \$ _____	Discover Network Debit \$ _____		

Other Volume %

MC Credit \$ _____	Visa Credit \$ _____	Discover Network Credit \$ _____	American Express Credit \$ _____	American Express One Point Credit \$ _____
MC Debit \$ _____	Visa Debit \$ _____	Discover Network Debit \$ _____		

Tiered

Discount Fees (Based on Gross Sales Volume)

	Discount	MPG TXN Fee		Discount	MPG TXN Fee		Discount	MPG TXN Fee		Discount	MPG TXN Fee
MC Qual Credit	%	\$	Visa Qual Credit	%	\$	Discover Network Qual Credit	%	\$	American Express Qual Credit	%	\$
MC Mid-Qual Credit	%	\$	Visa Mid-Qual Credit	%	\$	Disc. Network Mid-Qual Credit	%	\$	American Express Mid-Qual Credit	%	\$
MC Non-Qual Credit	%	\$	Visa Non-Qual Credit	%	\$	Disc. Network Non-Qual Credit	%	\$	American Express Non-Qual Credit	%	\$
MC Worldcard Qual	%	\$	Visa Rewards 1	%	\$						
MC Worldcard Mid-Qual	%	\$	Visa Rewards 2	%	\$						
MC Worldcard Non-Qual	%	\$									
MC Qual Debit	%	\$	Visa Qual Debit	%	\$	Discover Network Qual Debit	%	\$			
MC Mid-Qual Debit	%	\$	Visa Mid-Qual Debit	%	\$	Disc. Network Mid-Qual Debit	%	\$			
MC Non-Qual Debit	%	\$	Visa Non-Qual Debit	%	\$	Disc. Network Non-Qual Debit	%	\$			
MC Regulated Debit Disc't	%	\$	Visa Regulated Debit Disc't	%	\$	Disc. Network Reg. Debit Disc't	%	\$			

ERR

	Discount	Non-Qual Fees		Discount	Non-Qual Fees		Discount	Non-Qual Fees		Discount	Non-Qual Fees
MC Qual Credit	%	%	Visa Qual Credit	%	%	Discover Network Qual Credit	%	%	American Express Qual Credit	%	%
MC Qual Debit	%	%	Visa Qual Debit	%	%	Discover Network Qual Debit	%	%		%	%

Pass Through Interchange - 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.)
MC Qual Credit	%	Visa Qual Credit	%	Discover Network Qual Credit	%	American Express Qual Credit	%
MC Qual Debit	%	Visa Qual Debit	%	Discover Network Qual Debit	%		%

PIN Debit

<input type="checkbox"/> Pass Through Debit Network Fees	Other Item Rate \$ _____ (per item)	Other Volume Percent _____ % (per item)
--	-------------------------------------	---

PART I: CONFIRMATION PAGE

PROCESSOR INFORMATION: Name: First Data Merchant Services
Address: 1307 Walt Whitman Road, Melville, NY 11747
URL: _____ 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 are assessed** on transactions that qualify for certain reduced interchange rates imposed by MasterCard, Visa and Discover. Any transactions that fail to qualify for these reduced rates will be charged an additional fee (see Section 19 of the Program Guide).
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. For a more detailed discussion regarding Chargebacks see Section 10 of Card Processing Operating Guide or see the applicable provisions of the TeleCheck Services Agreement.
4. **If you dispute any charge or funding,** you must notify us within 60 days of the date of the statement where the charge or funding appears for Card Processing or within 30 days of the date of a TeleCheck transaction.
5. **The Agreement limits our liability to you.** For a detailed description of the limitation of liability see Section 21, 28.7, 31.3, and 33.10 of the Card General Terms; or Section 1.14 of the TeleCheck Services 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 (see Card Processing General Terms in Section 24, Term; Events of Default and Section 25, Reserve Account; Security Interest), (see TeleCheck Services Agreement in Sections 1.1, 1.3.2, 1.3.9, 1.6), under certain circumstances.
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 three (3) year term, you will be responsible for the payment of an early termination fee as set forth in Part IV, A.3 under "Additional Fee Information" and Section 1 of the TeleCheck Services Agreement.
9. **If you lease equipment from Processor,** it is important that you review Section 1 in Third Party Agreements. Bank is not a party to this Agreement. **THIS IS A NON-CANCELABLE LEASE FOR THE FULL TERM INDICATED.**

10. Card Organization Disclosure

Visa and MasterCard Member Bank Information: Wells Fargo Bank N.A.

The Bank's mailing address is 1200 Montego, Walnut Creek, CA 94598, and its phone number is (925) 746-4143.

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 Card Organization thresholds.
- c) Review and understand the terms of the Merchant Agreement.
- d) Comply with Card Organization 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: http://usa.visa.com/merchants/operations/op_regulations.html
- g) You may download "MasterCard Regulations" from MasterCard's website at: <http://www.mastercard.com/us/merchant/support/rules.html>

Print Client's Business Legal Name: _____

By its signature below, Client acknowledges that it has received the Merchant Processing Application, Program Terms and Conditions [version _____] consisting of 47 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 STRIKE-OUTS TO THE PROGRAM TERMS AND CONDITIONS WILL BE ACCEPTED.

Client's Business Principal:

Signature (Please sign below):

X _____ Title _____ Date _____

Please Print Name of Signer