



MERCHANT PROCESSING AGREEMENT

Agent Code:

Additional Location: _____ Name: _____ SIC/MCC: _____ Received Date: _____

TID#: _____ MID#: _____ IATA/ARC: _____ (MCC 4722 Only)

SECTION 1) BUSINESS INFORMATION					
Name of Ownership Entity (Legal Name) ABC Enterprises, Inc.			Name of Business (Doing Business as/Same as Signage) Mike's Barber Shop		
Corporate/Billing Address 1234 Clark Street			Location Address (attach additional locations)		
City Valencia	State CA	Zip 12345	City	State	Zip
Phone # (661) 999-9999	Federal Tax ID 12-3456789	Phone #	Fax # (661) 999-9998		
Name (as it appears on your income tax return) ABC Enterprises, Inc.			<input type="checkbox"/> I certify that I am a foreign entity/nonresident alien (if checked, please attach IRS Form W-8)		
Contact Name Michael Johnson			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.)		
Web Address www.mbs.com			Email Address Mike@mbs.net		

SECTION 2) MERCHANT INFORMATION		Check One: <input checked="" type="checkbox"/> Retail <input type="checkbox"/> Service <input type="checkbox"/> Home <input type="checkbox"/> MO/TO <input type="checkbox"/> Internet	
Have you been placed on the "CTMF" (Combined Terminated Merchant File) or the "CMNF" (Consortium Merchant Negative File)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Describe business detail to include products and services: Barber Shop	
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Corporation Type of Corporation: _____ State of Incorporation: CA		Please list any Software used for storing, transmitting, or processing Card Transactions or Authorization Requests:	
Do you use any third party to store, process, or transmit cardholder data? If so list name/address: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Reason for Leaving: <input type="checkbox"/> Rate <input type="checkbox"/> Service <input type="checkbox"/> Terminated <input type="checkbox"/> Other: _____	
How Long in Present Business? Years: 4 Months: 1 Previous Processor: _____		List other here: _____	

SECTION 3) PRINCIPAL INDIVIDUAL #1						100 % Ownership	
Last Name Johnson		First Name Michael		MI	Title owner		
Residence Address 123 Elm Drive				City Valencia		State CA	Zip 12345
Home Phone # (661) 999-9999		Social Security # 123-45-6789		DOB 1/2/64	Driver's License #		State

SECTION 4) PRINCIPAL INDIVIDUAL #2						% Ownership	
Last Name		First Name		MI	Title		
Residence Address				City		State	Zip
Home Phone #		Social Security #		DOB	Driver's License #		State

SECTION 5) SETTLEMENT INFORMATION (please attach voided check)	
Deposit Bank	Bank Contact
Transit/ABA #	Deposit Account #

SECTION 6) PROCESSING AND AGREEMENT VOLUME				(for internal use only) <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Daily	
Avg. Yearly Vol. MC/VISA/DISCOVER NETWORK	\$ 144,000	Avg. Yearly Vol. AMERICAN EXPRESS	\$ 50,000		
Avg. Ticket MC/VISA/DISCOVER NETWORK	\$ 15.00	Avg. Ticket AMERICAN EXPRESS	\$ 15.00		
Peak Season Vol. MC/VISA/DISCOVER NETWORK	\$	Max Ticket	\$ 50.00		
Seasonal? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	High Vol. Months Open From:	To:			

SECTION 7) TERMINAL INFORMATION					<input type="checkbox"/> Reprogram	<input type="checkbox"/> Purchase	<input type="checkbox"/> Lease
<input type="checkbox"/> Omaha	<input type="checkbox"/> Nashville	<input type="checkbox"/> Cardnet	<input type="checkbox"/> Buypass	<input type="checkbox"/> Retail	Terminal Type: PAX S80		
<input type="checkbox"/> Restaurant	<input type="checkbox"/> MO/TO	<input type="checkbox"/> Retail Tip	<input type="checkbox"/> Quick Serve Rest w/Tip	<input type="checkbox"/> Hotel	Software Type:		
<input checked="" type="checkbox"/> Swiped	90 %	<input checked="" type="checkbox"/> Imprint/Keyed	10 %	Other:			
<input type="checkbox"/> MO/TO	%	<input type="checkbox"/> Internet	% = 100%		Internet Gateway <input type="checkbox"/> Name:		
					Wireless Network:		
Entitlement Services		Merchant Number		First Data			
<input checked="" type="checkbox"/> American Express ESA/Pass Through	#	1234567891		First Data Global Leasing? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<input type="checkbox"/> Diners Club/Carte Blanche	#			Lease Term: (months)			
<input type="checkbox"/> JCB	#			This is a non-cancelable lease for the full terms indicated.			Client's Initials:
<input type="checkbox"/> TeleCheck SE#	#			Monthly Lease Charges for this Location: \$			
<input type="checkbox"/> TeleCheck (Split Dial)	#			Annual Tax/Handling Fee: \$10.20			
<input type="checkbox"/> MMICR	<input type="checkbox"/> License #	or					
<input type="checkbox"/> Guarantee	<input type="checkbox"/> ECA						

SECTION 8) SERVICE FEE SCHEDULE			
It is presumed you will ACCEPT ALL VISA, MASTERCARD, DISCOVER NETWORK, and AMERICAN EXPRESS TRANSACTIONS, unless any selections below are checked.		See Section 1.9 of the Program Guide for details regarding limited acceptance.	
MASTERCARD	<input type="checkbox"/> Accept MasterCard CREDIT Transactions ONLY <input type="checkbox"/> Accept MasterCard NON-PIN DEBIT Transactions ONLY	VISA	<input type="checkbox"/> Accept Visa CREDIT Transactions ONLY <input type="checkbox"/> Accept Visa NON-PIN DEBIT Transactions ONLY
DISCOVER NETWORK	<input type="checkbox"/> Accept Discover Network CREDIT Transactions ONLY <input type="checkbox"/> Accept Discover Network NON-PIN DEBIT Transactions ONLY	AMERICAN EXPRESS	<input type="checkbox"/> Accept American Express CREDIT Transactions ONLY

<input type="checkbox"/> Interchange Cost Plus Program		
Pass Through MasterCard, Visa & Discover Interchange and American Express Pricing plus	% on gross volume	Per Transaction Fee \$

<input checked="" type="checkbox"/> 3 Tier <input type="checkbox"/> ERR			
Fee Category	Discount Rate	Transaction Fee	ERR%
Visa/MC/Discover Network QUAL CREDIT	1.69 %	\$.15	%
Visa/MC/Discover Network MID-QUAL CREDIT	2.40 %	\$.15	N/A
Visa/MC/Discover Network NON-QUAL CREDIT	3.20 %	\$.15	N/A
Visa/MC/Discover Network QUAL DEBIT	1.49 %	\$.15	%
Visa/MC/Discover Network MID-QUAL DEBIT	2.40 %	\$.15	N/A
Visa/MC/Discover Network NON-QUAL DEBIT	3.20 %	\$.15	N/A
American Express QUAL CREDIT	%	\$	%
American Express MID-QUAL CREDIT	%	\$	N/A
American Express NON-QUAL CREDIT	%	\$	N/A

American Express Rates		
<input type="checkbox"/> American Express ESA/Pass Through*	*American Express Mo. Flat Fee or Discount Rate may apply.	**As Apply to ESA.
<input type="checkbox"/> American Express Discount Rate:**	% or <input type="checkbox"/> American Express Monthly Flat Fee:** \$7.95	Services, Wholesale <input type="checkbox"/> \$0.15 Trans Fee
<input type="checkbox"/> American Express PrePaid Discount Rate	% Flat per Trans Fee \$	Retail <input type="checkbox"/> \$0.10 Trans Fee

Authorization & Transaction Fees (fee per item)			
Visa/MC/Discover Network Auth. Fee	\$.10	American Express Auth. Fee	\$.25
Transarmor Authorization Fee	\$	Batch Fee	\$.25
Diner's Authorization Fee	\$	JCB Authorization Fee	\$
Wireless Transaction Fee	\$	Gateway Transaction Fee	\$

Monthly Fees			
Min. Monthly Fee	\$ 25.00	per location	E-Merchant View \$ 14.95 per access
Statement Fee	\$ 15.00	per statement	Gateway Fee \$ per website
Wireless Fee	\$	per terminal	eIDS Fee \$ per access
Clover Fee	\$	per station	Insightics Fee \$ per location
<input type="checkbox"/> CarePoint**	**Requires a separate Agreement (see Section 9)		CarePoint Fee \$ per month

Other Fees			
PCI Compliance Fee	\$ 9.99	per month	One-Time Admin. Fee \$ Early Termination Fee \$ 495.00
IRS TIN Processing Fee	\$ 4.95	per month	Annual Membership Fee \$ Other Volume %

Pin Debit Fees			
Pin Debit <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Plus Debit Network Processing Fees		Pin Debit Other Volume Percentage %
PIN Debit Fee (per transaction) \$	Debit Access Fee (per location) \$		

EBT Fees			
EBT Fees (per transaction) \$	Monthly Access Fee \$	EBT (SNAP/FNS) Number:	<input type="checkbox"/> Food Stamps <input type="checkbox"/> Cash Benefits

Fleet Rates & Fees			
Wright Express: Other Item Rate \$	per item	Voyager: QUAL %	Other Item Rate \$ per item

TeleCheck Rates & Fees <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Inquiry Rate %	Customer Requested Operator Call (CROC)	\$ 2.25	
December Risk Surcharge 0.10 %	ECA Chargeback Fee (Only charged when entitled with TeleCheck)	\$ 2.25	
Per transaction Fee \$	Statement/Processing Fee	\$ 5.00	
Monthly Minimum Fee \$	per location		

When entitled with TeleCheck, see Program Guide for definitions, warranty requirements and any additional fees.

SECTION 9) MISCELLANEOUS FEES	
Checking Account (DDA Change) - \$25.00, ACH Reject Fee - \$25.00, Chargeback Fee (per item) - \$25.00* (refer to Part IV, Section A3 of the Program Guide), Documentation - \$2.00 per page, Research/Investigation Fee - \$150.00 per hour (\$25.00 minimum), 3rd Party Help Desk Calls - \$6.00 per call, Retrieval Fee - \$10.00 per item, Merchant Club - \$12.95 per location, Voice Authorization - \$0.95 per item, Electronic AVS Fee - \$0.05 per item, Voice AVS Fees - \$2.25 per item, Annual Membership - \$89.00 applies unless otherwise indicated in higher above field. Pass through all Card Association fees at cost for the following but not limited to: Pass Through MasterCard, Visa & Discover Dues & Assessments; MasterCard Processing Integrity Fee; MasterCard National Acquirer Brand Usage (NABU) Fee; MasterCard Cross Border Fee; MasterCard Acquirer Support Fee; MasterCard License Fee; MasterCard ICA Fee; MasterCard Kilobyte Fee; MasterCard AVS Fee; MasterCard CVC2 Fee; Visa Misuse of Authorization Fee; Visa Zero Floor Limit Fee; Visa Acquirer Processing Fee; Visa Transaction Integrity Fee; Visa International Acquirer Fee; Visa ACQ ISA Fee; Visa BIN Fee; Visa Fixed Acquirer Network Fee (FANF); Visa Kilobyte Fee; Visa AFD Non Participation Fee; Discover International Processing & Service Fee; Discover Data Usage Charge; Discover Network Authorization Fee; American Express Network Fee. IRS TIN Non-Compliance Fee - \$17.95 per month - PCI Non-Compliance Fee - \$19.95 per month. Wireless and/or Gateway - \$0.05 per transaction for monthly volume over \$5,000. In the event that Client terminates or breaches the terms of this Agreement before the end of the initial three (3) year term, Client shall be obligated to immediately pay Acquirer or its representative, as liquidated damages, an early termination fee in addition to any other monthly fees in the Merchant Processing Agreement for the remaining term of the Agreement. CarePoint monthly fee - additional membership information and options are provided at www.mycarepointservices.com/MBN .	

SECTION 10) GUARANTY

In exchange for Processor, Wells Fargo Bank, N.A. and TeleCheck Services, Inc. (the Guaranteed Parties) acceptance of, as applicable, the Agreement, and/or the Equipment Lease Agreement and/or the TeleCheck/TRS Services Agreement, the undersigned unconditionally and irrevocably guarantees the full payment and performance of Client's obligations under the foregoing agreements, as applicable, as they now exist or as modified from time to time, whether before or after termination or expiration of such agreements and whether or not the undersigned has received notice of any amendment of such agreements. The undersigned waives notice of default by Client and agrees to indemnify the Guaranteed Parties for any and all amounts due from Client under the foregoing agreements. The Guaranteed Parties shall not be required to first proceed against Client to enforce any remedy before proceeding against the undersigned. This is a continuing personal guaranty and shall not be discharged or affected for any reason. The undersigned understands that this is a Personal Guaranty of payment and not of collection and that the Guaranteed Parties are relying upon this Personal Guaranty in entering into the foregoing agreements, as applicable.

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).

Client certifies, under penalties of perjury, that the federal taxpayer identification number and corresponding filing name provided herein are correct.



Michael Johnson
Signature of Personal Guarantor (No Title)

1-2-2015
Date

Signature of Co-Personal Guarantor (No Title)

Date

SECTION 11) MERCHANT ACCEPTANCE

Client certifies that all information set forth in this completed Merchant Processing Application is true and correct and that the Client has received a copy of the MC, Visa, and Discover Network Tiered Grid ID Numbers, Program Guide (Version MBNOB1707) and Confirmation Page, which is part of this Merchant Processing Application (consisting of Sections 1-11), and by this reference incorporated herein, 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 7 in this Merchant Processing Application, 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 Equipment Lease Agreement, and the TeleCheck Services Agreement in Part III of the Program Guide, if selected, the undersigned Client being the "Lessee" for purposes of such Equipment Lease Agreement and/or "You" and "Your" for the purposes of the TeleCheck Services Agreement. Client authorizes Processor and Wells Fargo Bank, N.A. ("Bank") and their agents to investigate the references, statements and other data contained herein and to obtain additional information from credit bureaus and other lawful sources, including persons and companies names in this Merchant Processing Application. Client authorizes Processor and Bank and their agents (a) to procure information from any consumer reporting agency bearing his/her personal credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics and mode of living, and (b) to contact all previous employers, personal references and educational institutions. Each of the undersigned authorizes us and our Affiliates to provide amongst each other the information contained in this Merchant Processing Application and Agreement and any information received from all references, including banks and consumer reporting agencies. It is our policy to obtain certain information in order to verify your identity while processing your account application.

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.

"By signing below, I represent that I have read and am authorized to sign and submit this application for the above entity which agrees to be bound by the American Express® Card Acceptance Agreement ("Agreement"), and that all information provided herein is true, complete and accurate. I authorize Merchants Bancard Network and American Express Travel Related Services Company, Inc. ("AXP") and AXP's agents and Affiliates to verify the information in this application and receive and exchange information about me personally, including by requesting reports from consumer reporting agencies, and disclose such information to their agent, subcontractors, Affiliates and other parties for any purpose permitted by law. I authorize and direct Merchant Bancard Network (MBN) and AXP and AXP agents and Affiliates to inform me directly, or through the entity above, of reports about me that they have requested from consumer reporting agencies. Such information will include the name and address of the agency furnishing the report. I also authorize AXP to use the reports on me from consumer reporting agencies for marketing and administrative purposes. I am able to read and understand the English language. Please read the American Express Privacy Statement at <http://www.americanexpress.com/privacy> to learn more about how AXP protects your privacy and how AXP uses your information. I understand that I may opt out of marketing communications by visiting this website or by contacting American Express at 1-800-528-5200.

I understand that upon AXP's approval of the Application as applicable, the entity will be provided with the Agreement and materials welcoming it to AXP's standard Card acceptance program.



Michael Johnson
Signature Owner/Authorized Officer No. 1

Michael Johnson Owner
Print Name Title

1-2-2015
Date

Signature Owner/Authorized Officer No. 2

Print Name Title

Date

Wells Fargo Bank, N.A., 1200 Montego, Walnut Creek, CA 94598

Print Name

Signature of Authorized Officer MBN

Title

Date

Signature of Authorized Officer Acquirer

Title

Date



MERCHANT SITE SURVEY FORM

Must be submitted with Merchant Processing Agreement. To be completed by Agent.

RETAIL		
Merchant Location: <input checked="" type="checkbox"/> Store Front <input type="checkbox"/> Office Building <input type="checkbox"/> Warehouse <input type="checkbox"/> Residence <input type="checkbox"/> Other		
The Merchant: <input type="checkbox"/> Owns <input type="checkbox"/> Leases building premises		
Landlord Name:		
Landlord Phone #:		
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Merchant appears to be conducting business as represented in the application.
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Merchant is adequately staffed and stocked to do business.
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Merchant has posted any business license(s) required to do business.
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Have you taken pictures inside and outside the premises?
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Have you confirmed the identity of the person who signed the contract?
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Have you confirmed the signer as owner and/or principal of the business?

MOTO & INTERNET - if Retail skip section and sign below		
1. What % of bankcard sales represent business to business (B2B) (vs. business to consumer): B2B % + B2 Consumer % = 100%		
2. What is the time frame from transaction to delivery? 0-7 days % + 8-14 days % + 15-30 days % + > 30 days % + (% of orders delivered in each timeframe = 100%):		
3. MC/Visa/Discover Network/American Express sales are deposited (check one): <input type="checkbox"/> Date of Order <input type="checkbox"/> Date of Delivery <input type="checkbox"/> Other (specify):		
4. Who performs product/service fulfillment? <input type="checkbox"/> Direct <input type="checkbox"/> Vendor <input type="checkbox"/> Other If Vendor add name and address info below:		
Name:		Phone:
Address:		
Describe how the transaction works, from order taking to merchant fulfillment (attach additional sheet if necessary):		
5. 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		
6. Do you send notifications to customers of recurring billing as a reminder? <input type="checkbox"/> Yes <input type="checkbox"/> No		
7. Return Policy: <input type="checkbox"/> Full Refund <input type="checkbox"/> Exchange Only <input type="checkbox"/> None		
8. Do you have a refund policy for MC/Visa/Discover Network/American Express 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/Visa/Discover Network/American Express Credit		
9. 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 Marketing materials required for Mail Order, B2B and Internet over \$1 Million in annual volume. Attach web page for Internet Merchant.		

Comments:

**I hereby verify that I have physically inspected the business premises of the merchant at this address.
I also verify that all information submitted in this application is correct to the best of my knowledge.**

Inspected By/Sales Representative (print name) <i>John Smith</i>	Agent Code
Signature <i>John Smith</i>	Date <i>1-2-2015</i>

PROCESSOR INFORMATION: Name: Merchants Bancard Network
 Address: 25322 Rye Canyon Road, Valencia, CA 91355
 URL: _____ Customer Service #: (877) 871-4629

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: ABC Enterprises, Inc.

By its signature below, Client acknowledges that it has received the Merchant Processing Application, Program Terms and Conditions [version MBNOB1707] consisting of 52 pages [including this Confirmation Page and the applicable Third Party Agreement(s)].

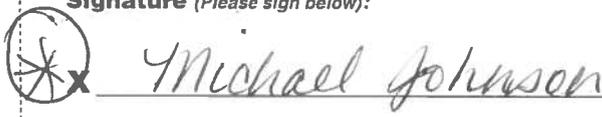
Client further acknowledges reading and agreeing to all terms in the Program Terms and Conditions. Upon receipt of a signed facsimile or original of this Confirmation Page by us, Client's Application will be processed.

Client understands that a copy of the Program Guide is also available for downloading from the Internet at: www.mbnocard.com

NO ALTERATIONS OR STRIKE-OUTS TO THE PROGRAM TERMS AND CONDITIONS WILL BE ACCEPTED.

Client's Business Principal:

Signature (Please sign below):

 Michael Johnson Owner 1-2-2015
 Title Date

Michael Johnson
 Please Print Name of Signer



FREE TERMINAL PROGRAM AGREEMENT

DBA: Mike's Barber Shop Serial #:
Model: PAX S80 Make:

This Agreement is a contract between the Merchant named below and Merchants Bancard Network Inc.

NOW THEREFORE, Merchants Bancard Network Inc. (MBN) and the Party (Merchant) agree as follows:

- I. Merchant agrees that the Equipment is the property of MBN and is being licensed to Merchant, and must be returned in good and working condition within ten (10) days of the termination or expiration of the Merchant Account with MBN.
II. Merchant agrees to indemnify and hold MBN harmless from and against any and all liabilities, losses, claims, damages, disputes, offsets, claims or counterclaims of any kind in any way related to the use (or misuse) of the Equipment.

Except as herein otherwise expressly provided, the Merchant Agreement, as heretofore amended, shall remain in full force and effect.

Merchant's Authorized Signer:



Michael Johnson
Owner's/Officer's Signature

1-2-2015
Date

Michael Johnson
Print Name

MBN Bancard Network:

Account Executive Signature

Date

INDIVIDUAL GUARANTY (NO TITLES) I/We hereby guarantee to MBN Bancard Network, LLC., their successors and assigns, the full, prompt and complete performance of Merchant and all of Merchant's obligations under this Agreement, including, but not limited to, all monetary obligations arising out of Merchant's performance or nonperformance under this Agreement, whether arising before or after termination of this Agreement. The undersigned, by signing below, agrees to be bound by the Agreement and this Guaranty.

Michael Johnson
Personal Guarantor (Print Name)



Michael Johnson
Personal Guarantor Signature

1-2-2015
Date