



# Prepaid Center Merchant Services Application and Agreement



<b>Attachments:</b>	<input type="checkbox"/> Voided Check or Bank Letter <b>(required)</b>	<input type="checkbox"/> Equipment Agreement (if applicable)
	<input type="checkbox"/> Tax Resellers Certificate <b>(required)</b>	<input type="checkbox"/> Schedule A <b>(required)</b>

Fax: 1-866-896-2585  
 Email: prepaid@paymentallianceintl.com

Channel Code: \_\_\_\_\_ Office Name: \_\_\_\_\_ Sales Agent: \_\_\_\_\_

Physical Location (DBA) Information			Billing Information		
Merchant's DBA Name/Outlet Name:			Merchant's Legal Name: (Same as voided check)		
Physical Street Address (No P.O. Box):			Address:		
City:	State:	Zip:	City:	State:	Zip:
DBA Phone:	Fax:		Phone:	Fax:	
Contact Name:	Alternate Phone:		Contact Name:	Alternate Phone:	
E-Mail Address:			E-Mail Address:		

Description of Business:	SIC Code:
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Shipping Instructions if different from DBA address			
Company:	Attn:		
Address:	City:	ST:	Zip:

Terminal Type	Current Version of Terminal Software	Equipment Provider	Communication	Other Applications on Terminal (Please check and list provider for all that apply)	Payment Method
<input type="checkbox"/> PAI Trex	<input type="checkbox"/> Unknown	<input type="checkbox"/> Merchant (reprogram)	<input type="checkbox"/> Dial-up	<input type="checkbox"/> None	<input type="checkbox"/> Purchase
<input type="checkbox"/> VeriFone 3740	<input type="checkbox"/> VMAC 1.4.4	<input type="checkbox"/> Sales Office	<input type="checkbox"/> IP	<input type="checkbox"/> Credit / Debit	<input type="checkbox"/> Placement (equipment usage agreement applies)
<input type="checkbox"/> VeriFone 3750	<input type="checkbox"/> VMAC 1.4.2	<input type="checkbox"/> Payment Alliance Intl'	<input type="checkbox"/> Other _____	<input type="checkbox"/> Fleet & Fuel	<input type="checkbox"/> None / Other
<input type="checkbox"/> VeriFone 3750 dualcom	<input type="checkbox"/> VMAC 1.61	<input type="checkbox"/> Other _____	<b>Prefix / Suffix</b>	<input type="checkbox"/> Check Services	<b>Schedule A</b>
<input type="checkbox"/> VeriFone Vx510	<input type="checkbox"/> Other _____		<input type="checkbox"/> Yes _____	<input type="checkbox"/> Gift & Loyalty	<input type="checkbox"/> ISR-11 <input type="checkbox"/> ISR-21
<input type="checkbox"/> VeriFone Vx570			<input type="checkbox"/> No	<input type="checkbox"/> Age & ID	<input type="checkbox"/> ISR-12 <input type="checkbox"/> ISR-22
<input type="checkbox"/> Personal Computer				<input type="checkbox"/> Other Prepaid	<input type="checkbox"/> ISR-13 <input type="checkbox"/> ISR-23
Terminal Serial #:	Systems Bio Password:(VeriFone)			<input type="checkbox"/> Other	<input type="checkbox"/> PAI-14 <input type="checkbox"/> PAI-24

Merchandising		
<input type="checkbox"/> Floor Rack <b>(Default Package)</b> - Wireless Placebo Cards, Long Distance POSA Cards and Discover POSA Cards	<input type="checkbox"/> Counter Rack 2 - Long Distance POSA Cards Only	All merchandising packages are sent with a Welcome Kit, Posters and Window Clings. If no merchandising selection is made, the default package will be sent.
<input type="checkbox"/> Counter Rack 1 - All Long Distance & Discover POSA Cards	<input type="checkbox"/> Counter Rack 3 - Discover POSA Cards Only	

Special Prepaid Instructions											

Account Boarding Only											
<b>Download:</b>	<input type="checkbox"/> Remote (NPS)	<input type="checkbox"/> TPG	<input type="checkbox"/> Other	<b>TID:</b>							



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Attachments: [ ] Voided Check or Bank Letter (required) [ ] Equipment Agreement (if applicable) [ ] Tax Resellers Certificate (required) [ ] Schedule A (required)

Fax: 1-866-896-2585 Email: prepaid@paymentallianceintl.com

Channel Code: \_\_\_\_\_ Office Name: \_\_\_\_\_ Sales Agent \_\_\_\_\_

The undersigned ("Subscriber") \_\_\_\_\_ hereby authorizes Now Prepay, a division of VendTek Systems Inc (VSI), and or its agent, Payment Alliance International, Inc. ("PAI"), to electronically debit fees due VSI for Products & Services received from VSI as agreed to herein (Agreement) effective as of the following date: \_\_\_\_\_.

SUBSCRIBER ACH ACCOUNT INFORMATION: Must include a voided business check or bank letter. Financial Institution: \_\_\_\_\_ ABA Transit Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

AGREEMENT:

VSI will sell to the Subscriber prepaid wireless, long distance and other prepaid products and services as may be made available ("Products & Services") at prices discounted from manufacturer's suggested retail price. Such Product & Services discounts may be changed at the sole discretion of VSI with 10 days advance notice. By signature below, Subscriber hereby authorizes its financial institution to accept and process debits initiated by VSI (or PAI on behalf of VSI) or its Originating Depository Financial Institution on the above designated depository account for fees and payments due VSI ("Settlement Amount") in accordance with Products & Services provided by VSI. The Settlement Amount due VSI will be debited weekly. VSI reserves the right to increase the frequency of ACH electronic debits for the Settlement Amount to a maximum of once daily. Each ACH electronic debit will be preceded by an associated Settlement Amount invoice delivered by e-mail a minimum of 24 hours prior to each debit. In addition to the Settlement Amount, Subscriber authorizes VSI to collect on behalf of Payment Alliance International Inc. (PAI) and for transfer to PAI such fees as PAI may request be collected as agreed to by separate agreement between PAI and the Subscriber. In the absence of a Subscriber e-mail address, invoices will be delivered by regular mail to such address as provided by the Subscriber and the Subscriber hereby accepts and agrees that such invoice delivery may therefore be after the associated ACH electronic debit has been completed. The Settlement Amount will be equal to manufacture's suggested retail price less the Subscriber discount per Schedule A attached hereto. Subscriber agrees to pay VSI a \$25.00 processing fee for any ACH electronic debit due VSI by Subscriber which is not paid by Subscriber's financial institution upon presentment. Such returned ACH processing fee shall be electronically debited or is payable upon demand at the option of VSI. Subscriber understands that this authorization shall remain in effect unless revoked in writing, but that Subscriber may not revoke such authorization during any period that electronic transactions are being cleared by VSI or PAI, nor for a period of 60 days following electronic transmission of a final batch transmission nor in the event that the subscriber has any unpaid fees and or payments due to VSI for Products & Services provided. Subscriber understands that Subscriber must notify VSI of any change in (a) ownership or (b) designated depository account and that absent sufficient advance written notice, amounts credited or debited to Subscriber subsequent to any such change may be subsequently held by VSI or PAI until a determination is made regarding true and correct ownership of the transaction entries in question. In connection with this application and approval thereof, Subscriber and the Guarantor(s), below, collectively by their signatures hereto, authorize VSI or PAI or other VSI representative to procure investigative consumer reports and understand that such reports may contain information about financial stability, background, character, and personal reputation.

Subscriber understands that termination of this authorization does not affect Subscriber's obligation to pay for Products & Services received from VSI. Subscriber agrees to pay all amounts due to VSI as invoiced according to the Products & Services provided by VSI. Subscriber's financial institution will treat each debit as if Subscriber had personally issued a written direction authorizing VSI to debit the amount(s) specified to Subscriber's account and need not verify that payments are drawn in accordance with this authorization. Subscriber acknowledges that delivery of this authorization to VSI constitutes delivery to Subscriber's financial institution. Subscriber warrants that all persons whose signatures are required to sign on this account have signed this authorization.

This Agreement includes all of the terms and conditions and has been executed on behalf of and by the authorized party as of the date written below in multiple copies each being effective as an original.

By submitting this completed Merchant Application Form, you as a prospective Subscriber, hereby grant permission to VSI and PAI to acquire a credit report and contact credit references. By accepting and processing the information provided on this Merchant Application, no binding agreement is made between VSI and the perspective Subscriber. VSI reserves all rights, in its sole discretion, to approve or deny any person or entity from becoming a VSI Subscriber. If approved for consideration, the prospective Subscriber must enter into an ACH Electronic Debit Authorization Agreement with VSI before subscribing to Now Prepay Merchant Services.

Accepted By:

Subscriber Signature \_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_

PERSONAL GUARANTY

The undersigned jointly and severally, hereby unconditionally guaranty, without deduction or diminution by reason of counterclaim, offset, or defense, and in accordance with all terms and conditions, the prompt and complete payment and performance of this Agreement including any and all modifications, addendums, and amendments thereof. The undersigned warrant and guaranty that the Agreement has been properly executed, and agree that this guaranty shall be of full force and effect irrespective of any invalidity or unenforceability of the Agreement or any provisions thereof. The undersigned hereby waive notice of acceptance hereof, all notices of any kind to which we may be entitled, and all defenses of a guarantor or surety. The obligation and liability of each of the undersigned is direct, continuing, and unconditional, and neither VSI nor PAI shall be required to proceed against Subscriber or resort to any other right, remedy or security before proceeding against the undersigned under this guaranty. Service may be affected over the Guarantor by service on Subscriber and mailing of the summons and complaint by VSI or PAI to Subscriber. Subscriber and any Guarantors hereby waive any and all rights to a trial by jury and agree to the venue and jurisdiction of any court VSI or PAI may choose. The undersigned warrant that they have read the Agreement that is hereby ratified and confirmed, and agree that only the full payment and performance of the Agreement can discharge the undersigned's liability hereunder.

Guarantor(1) Signature: \_\_\_\_\_ Guarantor(2) Signature: \_\_\_\_\_

Guarantor(1) Printed Name: \_\_\_\_\_ Guarantor(2) Printed Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Witnessed By: \_\_\_\_\_ Witnessed By: \_\_\_\_\_

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

## UNIFORM SALES & USE TAX CERTIFICATE—MULTIJURISDICTION

The below-listed states have indicated that this form of certificate is acceptable, subject to the notes on pages 2-4. The issuer and the recipient have the responsibility of determining the proper use of this certificate under applicable laws in each state, as these may change from time to time.

Issued to Seller: \_\_\_\_\_

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

I certify that:

Name of Firm (Buyer): \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

is engaged as a registered

- Wholesaler
- Retailer
- Manufacturer
- Seller (California)
- Lessor (see notes on pages 2-4)
- Other (Specify) \_\_\_\_\_

and is registered with the below listed states and cities within which your firm would deliver purchases to us and that any such purchases are for wholesale, resale, ingredients or components of a new product or service<sup>1</sup> to be resold, leased, or rented in the normal course of business. We are in the business of wholesaling, retailing, manufacturing, leasing (renting) the following:

Description of Business: \_\_\_\_\_

General description of tangible property or taxable services to be purchased from the seller: \_\_\_\_\_

State	State Registration, Seller's Permit, or ID Number of Purchaser	State	State Registration, Seller's Permit, or ID Number of Purchaser
AL <sup>2</sup>	_____	MO <sup>13</sup>	_____
AR	_____	NE <sup>14</sup>	_____
AZ <sup>22</sup>	_____	NV	_____
CA <sup>3</sup>	_____	NJ	_____
CO <sup>1</sup>	_____	NM <sup>1,15</sup>	_____
CT <sup>4</sup>	_____	NC <sup>24</sup>	_____
DC <sup>5</sup>	_____	ND	_____
GA <sup>6</sup>	_____	OH <sup>25</sup>	_____
HI <sup>1,7</sup>	_____	OK <sup>16</sup>	_____
ID	_____	PA <sup>26</sup>	_____
IL <sup>1,8</sup>	_____	RI <sup>17</sup>	_____
IA	_____	SC	_____
KS	_____	SD <sup>18</sup>	_____
KY <sup>23</sup>	_____	TN	_____
ME <sup>9</sup>	_____	TX <sup>19</sup>	_____
MD <sup>10</sup>	_____	UT	_____
MI <sup>11</sup>	_____	VT	_____
MN <sup>12</sup>	_____	WA <sup>20</sup>	_____
		WI <sup>21</sup>	_____

I further certify that if any property or service so purchased tax free is used or consumed by the firm as to make it subject to a Sales or use Tax we will pay the tax due directly to the proper taxing authority when state law so provides or inform the seller for added tax billing. This certificate shall be a part of each order which we may hereafter give to you, unless otherwise specified, and shall be valid until canceled by us in writing or revoked by the city or state.

Under penalties of perjury, I swear or affirm that the information on this form is true and correct as to every material matter.

Authorized Signature: \_\_\_\_\_

(Owner, Partner or Corporate Officer)

Title: \_\_\_\_\_

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

Note:

Use applicable state sales tax and use tax certificates for the following states: AR, CA, CT, DC, FL, IN, LA, MA, NY, WV, and WY.



# Prepaid Mall Pricing

Powered by:

Merchant Schedule A (1)



<b>Prepaid Wireless</b>	<b>Commission</b>
Airvoice Express	6.00%
Airvoice GSM	6.00%
Alltel	8.00%
AT&T	12.00%
Beyond GSM	12.00%
Blue Grass	7.00%
Boost Mobile	1.00%
Call Plus GSM	13.00%
Cingular	15.00%
Hargray	7.00%
i-Wireless	3.00%
Jump	8.00%
Locus GSM	13.00%
Locus Platinum	13.00%
Mojo	7.00%
Movida	6.00%
Net 10	7.00%
Omni Prepaid	14.00%
Omobile	11.00%
Oxygen Wireless	13.00%
Page Plus	8.00%
Platinumtel Combo	4.00%
Platinumtel Refill	4.00%
Sti Mobile	9.00%
T-Mobile	9.00%
Tracfone	6.00%
Tuyo	11.00%
Verizon	6.50%
Virgin Mobile	2.00%
<b>Prepaid Long Distance</b>	<b>Commission</b>
Asia Direct	23.00%
Cellular Long Distance	20.00%
Global Reach	29.00%
Jambo Africa	23.00%
La Fiesta	29.00%
Mi Pais Lindo	29.00%
Patriot	19.00%
Pennies Per Call	19.00%
TelePronto	19.00%
Telmex Multifon	14.00%
<b>Prepaid Discover</b>	<b>Commission (based on card cost)</b>
Discover Gift \$25 (card cost \$3.95)	22.90%
Discover Gift \$50 (card cost \$4.95)	15.30%
Discover Debit Initial Purchase (card cost \$5.95)	27.00%
Discover Debit Reload (card cost \$2.95)	18.90%
<b>International Mobile Top-Up</b>	<b>Commission</b>
International Mobile Top-Up	4.00%
<b>Terminal Usage Fee (if applicable)</b>	<b>\$25.00</b>