

Attached Required Document Checklist		Fax to : 901-692-9499	
Voided Check ☒		email to: applications@impactpays.net	
Copy of Drivers License ☒			
Managing Partner Name:			
Date Submitted: 5-14-20			
Merchant Application Submission Form			
Merchant (Business) DBA Name: Jasper Feed, Seed & Supply, Inc.			
Business Legal Name: Jasper Feed, Seed & Supply, Inc.			
Contact Name: John LAWSON		Contact Phone Number: 205-522-5076	
Physical Address: 1506 9th Avenue		City, State, Zip: Jasper, AL 35501	
Phone Number: 205-384-5547		Fax Number: 205-221-3853	
Email Address: jasperfeedseed@ymail.com		Website:	
Billing Address: 1506 9th Avenue		City: Jasper	
State: AL		Zip: 35501	
Business Type			
☒ Corporation - circle one: (Private) or Public		Business Start Date: 2003	
☐ LLC - circle one: C corp S corp P partner D disregarded entity			
☐ Sole Prop ☐ Other:		Federal Tax ID# 71-0929406 Refund Policy? ☒ Yes or No	
☐ Partnership		Types of Goods Sold: feed, seed, boots, clothing, fertilizer	
Ownership Information (Must be 51% or more)			
Officer/Owners Name: John D. LAWSON		Title: President Social Security: 416-29-4790	
Home Address: 522 Myers Road		City, State, Zip Code: Nauvoo, AL 35578	
Drivers License#: 6448945		Expiration Date: 3-6-21 State: AL	
DOB: 09-19-79		Home Phone Number: 205-522-5076 (Cell)	
% of Business Owned: 100%		Length of Ownership: 17yrs.	
Banking Information			
☐ Bank Reference (a copy of a voided check or a DDA verification letter from the bank is required)			
Name of Bank: Synovus			
ABA Routing #: 061100606			
Account #: 1015305616			
Estimated Sales Volume		Terminal Questions	
Estimated Annual Sales (All sales)	\$	Batch Out Time:	
Estimated Visa/MC/Discover Sales	\$	Communication Method: IP-internet or Dial-phone	
Estimated Monthly Visa/MC/Discover/ AMEX Sales	\$	Do you dial 9 for outside line? ☐ Yes - ☒ No	
Average Ticket	\$	Terminal Type:	
High Ticket	\$	Pin Pad Type:	
First two sections must equal 100% respectively		Reprogram Terminal: ☐ Yes - ☐ No	
Card Swiped:	% Card Keyed In: % = 100%	Equipment Purchase: ☐ Yes - ☐ No	
Card Present:	% Card Not Present % = 100%	Equipment Rental Program: ☐ Yes - ☐ No	
MOTO:	% Internet: %	PIN Debit Pin Pad: ☐ Yes - ☐ No	
Notes:		POS Software Integration: ☐ Yes - ☐ No	
		Software Name & Version:	
		Next Day Funding: ☐ Yes - ☐ No	
		Tip Edit: ☐ Yes - ☐ No	
		Version: 003	

DRIVER LICENSE

ALABAMA

NO. 6448945

CLASS DV

D.O.B. 09-19-1979

EXP 03-06-2021

JOHN DAVID

LAWSON

522 MYERS RD

NAUYO AL 35578-5614

ENDORSEMENTS

ISS 04-27-2017

REST A

SEX M

HT 6-03

WT 315

EYES BLU

HAIR BRO



Secretary Stan Stabler

Secretary of Law Enforcement

John Lawson

1015

JASPER FEED, SEED & SUPPLY INC

MAIN ACCOUNT
1506 9TH AVE
JASPER, AL 35501-3654



64-60/611

DATE _____

PAY
TO THE
ORDER OF _____

\$

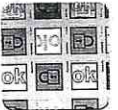
DOLLARS

SYNOVUS

Synovus Bank, Member FDIC

FOR _____

VOID



⑈001015⑈ ⑆0611006061⑆1015305616⑈

Details on back

Security Features