


Attached Required Document Checklist		Date Submitted:	Fax to: 901-692-9499	 Version: 005
Voided Check	<input checked="" type="checkbox"/>	11-15-23	email to: applications@impactpays.net	
Business Verification Document	<input checked="" type="checkbox"/>			
Copy of Drivers License	<input checked="" type="checkbox"/>			

Merchant (Business) DBA Name: Ellis Cleaners - Munsford

Business Legal Name: Ellis Cleaners LLC

Contact Name: Kathy Ellis Contact Phone Number: 901 258-0352

Physical Address: 11180 Hwy 515 City, State, Zip: Memphis, TN 38004

Phone Number: 901 837 2446 Fax Number:

Email Address: Wellis1951@ATT.NET Website:

Billing Address: Same City:

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Corporation - circle one: Private or Public

Business Start Date: 11-2008

LLC - Circle one: C corp S corp P partner D disregarded entity Refund Policy: 30 days 60 days Other: None

Sole Prop Other: \_\_\_\_\_ EIN/Federal Tax ID# 27-0663793 Print Refund Policy on Footer: Yes  No

Partnership \_\_\_\_\_ Types of Goods Sold: dry cleaning (If yes input message in notes)

Officer/Owners Name: William Donald Ellis Title: OWARR Social Security: 414 80 1638

Home Address: 1860 NELSON AVE City, State, Zip Code: Memphis TN 38114

Drivers License#: 035 703985 Expiration Date: 6-8-24 State: TN

DOB: 8-3-51 Home Phone Number: 901 258-0352

% of Business Owned: 100 % Length of Ownership: 15 YEARS

Name of Bank: Simmons Bank Batch Out Time: 7:00 pm

ABA Routing #: 082 900 432 Communication Method: IP-internet or Dial-phone Wise

Account #: 151 000 150 12834 Do you dial 9 for outside line? Yes  No

Terminal Type: VALOR

Estimated Annual Sales (All sales)	\$	Reprogram Terminal:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Estimated Visa/MC/Discover Sales	\$	Equipment Purchase:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Estimated Monthly Visa/MC/Discover/AMEX Sales	\$	Equipment Rental Program:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Average Ticket <u>See Statements</u>	\$	Next Day Funding:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
High Ticket <u>3.95%</u>	\$	Tip Edit:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Card Swiped: 98 % Card Keyed In: 2 % = 100%

Card Present: 98 % Card Not Present: 2 % = 100%

MOTO:  % Internet: \_\_\_\_\_ %

EFT: Yes  FNS Number: \_\_\_\_\_

Tax Calculation: Yes  If so tax rate: \_\_\_\_\_ %

Traditional  IBUXX SimpleBuxx PrimeBuxx

POS Software Integration: Yes  No

Software Name & Version:

Notes: ~~IBUXX~~ Buy the terminal  
~~SimpleBuxx~~ cost pays 1.97  
~~PrimeBuxx~~ cost pay 1.97  
 Wise

MP/AP Name: Copeland

RP Name:

Pricing Provided: Statement Analysis or Quote

Receipt Header Message: THANK you for your BUSINESS

Receipt Footer Message: THANK you for your BUSINESS