

MERCHANT PROCESSING AGREEMENT

Merchant Application and Fee Schedule

8500 Governors Hill Drive
Symmes Twp, OH 45249-1384
Phone: 888-208-7231
Fax: 877-822-1248

Please carefully complete the Application and read the Terms and Conditions and other additional forms, as applicable to you, which together make up the Merchant Processing Agreement. **The Terms and Conditions can be viewed at <http://info.vantiv.com/NPCCMA>. Please retain the website to review the Terms and Conditions as well a copy of the Merchant Application for your records.** Worldpay ISO, Inc. ("NPC") and Member Bank's acceptance of this Application will be made in a manner authorized in the Agreements and/or Terms and Conditions.

Sales Representative ID Number (9 digit or 16 digit code)

T 1 1 3 7 R 0 1 8

Bank # or Merchant Association #:

SECTION 1 MERCHANT BUSINESS INFORMATION

Business Legal Name: (Must Match Business Tax Return Name) JACQUI FORD LAW		Contact Name: JENNIFER RESER	
Business Name (DBA): JACQUI FORD LAW		E-mail address: JENNIFER@FORDLAWOKC.COM	
Business Location Address: 1621 N CLASSEN BLVD		Website: WWW.FORDLAWOKC.COM	
City, State, Zip: OKLAHOMA CITY, OK, 73106		Business Billing Address: (if different from location address) 1621 N CLASSEN BLVD	
Phone #: (405) 604-3200		City, State, Zip: OKLAHOMA CITY, OK, 73106	
Fax #:		Phone #: (405) 604-3200	
Federal Tax ID #: 45-4067413		Fax #:	

SECTION 2 BENEFICIAL/CONTROL OWNERSHIP INFORMATION

To help the government fight financial crime, Federal regulation requires certain financial institutions to obtain, verify, and record information about the beneficial owners of certain legal entity customers. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

Type of Legal Entity: Association/Estate/Trust Financial Institution Partnership SEC Registered Entity
 Government (Federal/State/Local) LLC Private Corporation
 Individual/Sole Proprietor Non-Profit/Tax-Exempt (501C) Publicly-Traded Corporation

Control Owner/Officer/Principal Name: Jacquelyn L Ford	Title: Owner	DOB: 1/13/1979	SSN #: 448-94-7984	Ownership Percentage 100
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Home Address: 1220 W Wilshire Blvd	City, State, ZIP: Nichols Hills, OK 73116	Phone #: (405) 740-2419
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Beneficial Owner/Officer/Principal Name: Jacquelyn L Ford	Title: Owner	DOB: 1/13/1979	SSN #: 448-94-7984	Ownership Percentage 100
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Home Address: 1220 W Wilshire Blvd	City, State, ZIP: Nichols Hills, OK 73116	Phone #: (405) 740-2419
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Beneficial Owner/Officer/Principal Name:	Title:	DOB:	SSN #: --	Ownership Percentage
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Home Address:	City, State, ZIP:	Phone #:
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Beneficial Owner/Officer/Principal Name:	Title:	DOB:	SSN #: --	Ownership Percentage
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Home Address:	City, State, ZIP:	Phone #:
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Beneficial Owner/Officer/Principal Name:	Title:	DOB:	SSN #: --	Ownership Percentage
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Home Address:	City, State, ZIP:	Phone #:
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SECTION 3 IMPORTANT DISCLOSURES

Merchant acknowledges receipt of NPC's documentation, which includes Merchant Processing Agreement Ver.GEN.0718

IMPORTANT MEMBER BANK RESPONSIBILITIES: (1) A Visa Member is the only entity approved to extend acceptance of Visa products directly to a Merchant. (2) A Visa Member must be a principal (signer) to the Merchant Agreement. (3) The Visa Member is responsible for educating Merchants on pertinent Visa Operating Regulations with which Merchants must comply. (4) The Visa Member is responsible for and must provide settlement funds to the Merchant. (5) The Visa Member is responsible for all funds held in reserve that are derived from settlement.

IMPORTANT MERCHANT RESPONSIBILITIES: (1) Ensure compliance with cardholder data security and storage requirements. (2) Maintain fraud and chargeback below thresholds. (3) Review and understand the terms of the Merchant Agreement. (4) Comply with Operating Regulations. The responsibilities listed above do not supersede the terms of the Merchant Agreement and are provided to ensure the Merchant understands some important obligations of each party and that the Visa Member (Acquirer) is the ultimate authority should the Merchant have any problems.

MEMBER BANK:
Fifth Third Bank
c/o Worldpay LLC
8500 Governors Hill Drive
Symmes Township, OH
45249
(866) 250-9764

Signature (Signature may be evidenced by facsimile) X	Name (please print)	Date
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Merchant's Business Name (Legal): JACQUI FORD LAW

SECTION 4 BUSINESS PROFILE AND ASSUMPTIONS									
<input type="checkbox"/> Ownership or Legal Entity Change		Close NPC Existing MID#:			Close Date Existing MID:		Open Date: 1/1/2011		
Annual Volume (Visa/MC/DS/AX):	\$80,000.00	% Card Present	50	% Card Swipe	0	% Imprint (Manually Keyed)	50	% B2B	0
Average Ticket (Visa/MC/DS/AX):	\$5,000.00	% Card Not Present	50	% MOTO	50	% Internet	0	% of International Cards	0
Highest Ticket (Visa/MC/DS/AX):	\$15,000.00	Total	100%						
<input type="checkbox"/> Add'l. Location 1st Location MID:				<input type="checkbox"/> Never Accepted Cards <input type="checkbox"/> Processor Change - How many processing statements are you including?					
Type of Goods/ Service Sold: Legal Services and Attorneys		REFUND POLICY (Check One): <input type="checkbox"/> No Refund			<input type="checkbox"/> Refund in 30 days or less		<input type="checkbox"/> Merchandise exchange only <input type="checkbox"/> Other		
Seasonal Sales: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Active Months: <input type="checkbox"/> JAN <input type="checkbox"/> FEB <input type="checkbox"/> MAR <input type="checkbox"/> APR <input type="checkbox"/> MAY <input type="checkbox"/> JUN <input type="checkbox"/> JUL <input type="checkbox"/> AUG <input type="checkbox"/> SEP <input type="checkbox"/> OCT <input type="checkbox"/> NOV <input type="checkbox"/> DEC							

SECTION 5 COMPLIANCE INFORMATION	
Do you (MERCHANT) have a <input type="checkbox"/> 3rd party software application/gateway or <input checked="" type="checkbox"/> POS Terminal	Are you compliant with the Payment Card Industry Data Security Standards? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
If yes, identify Security Assessor and certificate number: _____ Last Certification Date: _____	
Have you been notified by Visa, MasterCard or Discover that you have been the victim of a compromise of cardholder data? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	If yes, have you completed remediation? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Do you store cardholder data? Paper - <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Electronic - <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Third Party Software/Gateway Vendor Name and Address:	Third Party Software/ Gateway Vendor Contact Information:
Version #	Merchant data to which this vendor has access:
Does software store cardholder information? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is Third Party Software/Gateway PCI DSS and/ or PA DSS Compliant? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

All merchants must comply with the Payment Card Industry Data Security Standard ("PCI DSS"). Merchant is required to maintain the security of card data and to comply with the requirements of the PCI DSS. Merchant must validate its compliance with the PCI DSS and provide NPC with evidence that Merchant (a) has successfully completed a Self Assessment Questionnaire and scan(s), if applicable, and (b) is compliant with the PCI DSS. NPC has created the PCI Program (the "PCI Program") to assist merchants in securing card data and complying with PCI DSS. You are enrolled in the PCI Program and the applicable fees will be assessed in accordance with the terms of the PCI Program. Information on the PCI Program is set forth in Section 15 of the Terms and Conditions and the applicable fees are set forth in Section 11. All gateway or other vendor supplied software must be compliant with the Payment Application Data Security Standard rules ("PA DSS").

SECTION 6 MERCHANT BANK ACCOUNT INFORMATION	
In accordance with the terms set out in the Merchant Processing Agreement, funds will be transferred to/from the account as delineated. If nothing is checked, MERCHANT will receive Premium ACH. ACH can be performed by the following entities: Member Bank, NPC or any authorized agent of NPC or any Third Party Service Provider with whom you have contracted. *Subject to special approval	
Deposit Time Frame: <input type="checkbox"/> Premium ACH <input checked="" type="checkbox"/> Alternate Funding*	Deposit Type: <input checked="" type="checkbox"/> Combined <input type="checkbox"/> By Batch
Any ACCOUNT NUMBER indicated must be a valid account number for handling ACH deposits and withdrawals. If more than one account is indicated, account #1 will be used for Sales.	
Routing #1: 3 0 3 0 8 7 9 9 5	DDA Account Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings
Account #1: 6 7 0 1 0 1 2 4 7 9	
Routing #2:	DDA Account Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
Account #2:	If a second account, this account is used for: <input type="checkbox"/> Discount <input type="checkbox"/> Fees <input type="checkbox"/> Credits <input type="checkbox"/> Chargebacks

Section 7 CHECK/ACH SERVICES
 If Check Services are selected and by signing Merchant Processing Agreement, Merchant agrees to accept Check Services pursuant to, and to be bound by, the terms and conditions for Check products acceptance as stated in the Merchant Processing Agreement or as provided by Check services provider, SPS-EFT, or other service provider. Member Bank is not providing the Check/ACH Services. Merchant must be approved by NPC and its service provider, SPS-EFT, or by other service provider.
 ++ For Non-Guarantee checks \$10,000 and greater: A premium of 0.10% (ten basis points) will be charged in addition to the discount rate.
 ***These fees apply per account.

Check Service	Discount Rate	Transaction Fee	Check Service	Discount Rate	Transaction Fee	Other Check21 Fees
Check Conversion <input type="checkbox"/> w/ Guarantee			<input type="checkbox"/> Check21 POS - Guarantee <input type="checkbox"/> Check21 POS - Non-Guarantee**	0.00	0.00	Check21 Return Fee** : \$ 5.00
Check Conversion <input type="checkbox"/> w/o Guarantee			<input type="checkbox"/> Check21 Remote - Guarantee <input type="checkbox"/> Check21 Remote - Non-Guarantee**	0.00	0.00	Monthly Check21 Access Fee** : \$ 5.00
Paper Check w/ <input type="checkbox"/> Guarantee			<input type="checkbox"/> Check21 POS Payroll option - <i>Guarantee</i> : Discount Rate + 3% premium <input type="checkbox"/> Check21 POS Payroll option - <i>Non-Guarantee</i> : Discount Rate + 1% premium			<input type="checkbox"/> Monthly Billing
# of Checks Monthly:	Average Amount:	Largest Check Amount:	Monthly Service Fee**:	Batch Fee:	Monthly Minimum***: \$25.00	Annual Fee** : \$59.95 Termination Fee***: \$125.00

Merchant's Business Name (Legal): JACQUI FORD LAW

SECTION 8 FEE SCHEDULE

APPLICATION TYPE: Tiered* Flat Rate* Cash Advance **DISCOUNT:** Daily Monthly **CARD OPTIONS:** All Cards Other Cards Debit Card Only

BUSINESS TYPE Retail Restaurant Mail/Telephone Order** Internet**
SUB BUSINESS TYPE Retail Key Entered*** DialPay Capture*** MOTO/CardSwipe*** Large Ticket

VISA/MASTERCARD/DISCOVER (V/MC/D) Rate Category	Discount Rate	Transaction Fee	AMERICAN EXPRESS Rate Category*	Discount Rate	Transaction Fee
Base	0.40 %	\$ 0.20	Base	0.40 %	\$ 0.20
Mid-Qualified ¹ <small>(Not Applicable for Retail Key Entered, MOTO, Internet, DialPay Merchants)</small>	+ 0.00 %	+ \$ 0.00	Mid-Qualified ¹	+ 0.00 %	+ \$ 0.00
Non-Qualified ²	+ 0.00 %	+ \$ 0.00	Non-Qualified ²	+ 0.00 %	+ \$ 0.00

Base Debit NON PIN-Based ³
(Same as V/MC/D Discount Rate if left blank) Regulated Only⁶ 0.00 % + \$ 0

Debit PIN-Based⁴ Monthly Hosting Fee \$ % \$

Qualified Rewards ⁵ % Same as Visa/MC/Discover Transaction Fee

Miscellaneous Product Fees

Wireless Service³

Quantity	Setup Fee	Monthly Hosting Fee	Transaction Fee
	\$	\$	+

Micros³

Quantity	Setup Fee	Monthly Hosting Fee	Transaction Fee
	\$	\$	+

Internet Services³

Quantity	Setup Fee	Monthly Hosting Fee	Transaction Fee	Batch Fee
	\$	\$	+	\$

TIERED MERCHANTS ONLY - Commercial Card transactions that do not meet the requirements to qualify for preferred rates will be assessed an additional fee of 0.50% (0.0050) on such sales volume. ⁶Regulated applies to all Base NON PIN debit transactions from issuers that are not exempt pursuant to 12 CFR Part 235. NON PIN debit transactions from exempt issuers will fall under the Base V/MC/D discount rate. If a rate is identified but the Regulated Only box is not checked, then this rate applies to all Base NON PIN debit transactions. **If the Retail Key Entered/MOTO/Internet/DialPay Business Type is selected, Rewards cards will be charged discount rates plus 0.11% (0.0011) on all transactions. NPC's processing fees and Card Brand interchange fees are included in the discount rate. All other Card Brand fees will be assessed or allocated to Merchant at the then current rate determined in accordance with NPC's standard operating procedures.

*** INTERCHANGE MERCHANTS ONLY - CARD ORGANIZATION FEES:** Visa, MasterCard and Discover Interchange fees, assessments and other fees will be assessed or allocated to Merchant at the then current rate determined in accordance with NPC's standard operating procedures.

*** FLAT RATE MERCHANTS ONLY - CARD ORGANIZATION FEES:** All fees are included in discount rate and transaction fee above except fees related to International transactions. Does not apply to American Express.

AMERICAN EXPRESS - Existing American Express Number YES NO If Yes, Existing American Express Account Number: Annual Estimated or Actual American Express Volume is less than \$1,000,000.00 YES NO If No, Merchant is not eligible for the American Express Program.

By checking this box, Merchant elects to opt out of the American Express Program

By checking this box, Merchant elects to opt out of receiving American Express Marketing Materials.

SECTION 9 OCCURRENCE FEES

Batch Fee ¹¹	\$0.00 /per batch	<input type="checkbox"/> MyMerchantData.com	\$0.00 /month	<input type="checkbox"/> PCI Program Fee - Annual ⁴	\$90.00 /annual
ACH DBA Change Fee	\$25.00 /each	<input type="checkbox"/> Minimum Bill	\$25.00 /month	<input checked="" type="checkbox"/> Paper Statement	\$0.00 /month
On File Fee	\$10.00 /month	<input type="checkbox"/> Group Annual	\$99.00	<input type="checkbox"/> Regulatory and Compliance Fee ⁵	\$0.00 /annual
Card Brand Usage Fee (NABU) - MasterCard ²	\$0.06 /each	<input type="checkbox"/> Semi Annual Fee	\$45.00	<input checked="" type="checkbox"/> PCI Program Fee - Monthly	\$10.95 /month
Card Brand Usage Fee (NABU) - Visa ²	\$0.06 /each			<input type="checkbox"/> Advantage Buyer Program ³	\$25.00 /month
Retrieval Request	\$15.00 /each	<input type="checkbox"/> Merchant Training	\$0.00 /once	PCI DSS Non-Validation Fee	\$19.95 /each
Voice Authorization Fee	\$1.95 /each	<input type="checkbox"/> Welcome Kit	\$0.00 /once	IVR Authorizations	\$0.00 /each
Chargeback Fee	\$25.00 /each				

Return ACH(s) are subject to a \$25.00 fee for each occurrence.

¹¹Same as V/MC/D base transaction fee if left blank; if base V/MC/D transaction fee is left blank, the fee is \$0.30.

¹The initial term of the Merchant Agreement is 3 years and automatically renews for additional 2-year periods. If this Agreement is terminated prior to the expiration of the initial term or any renewal term, you will be subject to an Early Deconversion Fee ("EDF") in accordance with the terms of Section 7.B of the Terms and Conditions. If limited by state law, these fees may be modified in accordance with Section 7B of the Terms and Conditions.

²The Card Brand Usage Fee (NABU) includes the MasterCard Network Assessment and Brand Usage Fee, the Visa Acquirer Processing Fee, and the Visa Base II Transaction Fee and applies to Tiered Merchants Only.

³See Schedule I of the Terms and Conditions for additional information.

⁴Merchant may be charged a PCI Non-Compliance fee of \$19.95 per month per MID. Please refer to Section 6.G of the Terms and Conditions

⁵See Section 13 of the Terms and Conditions for additional information.

Merchant's Business Name (Legal): JACQUI FORD LAW

SECTION 10 UNLIMITED PERSONAL GUARANTY AND CREDIT INFORMATION AUTHORIZATION		
PERSONAL GUARANTEE: In exchange for NPC's and Member Bank's acceptance of this Merchant Agreement, each person signing immediately below this paragraph (each such person, a "Guarantor") is signing this Merchant Agreement as a Guarantor of the Merchant identified on page 1 of the Merchant Agreement. By signing below, each Guarantor (i) accepts and agrees to be bound by the Continuing Unlimited Guaranty provisions starting in Section 11 of the Terms and Conditions, and (ii) acknowledges and confirms that, prior to signing, he or she received and read those Continuing Guaranty provisions. Each Guarantor individually authorizes NPC, Member Bank, and/or either of their representatives to conduct an initial and ongoing comprehensive credit investigation of him or her by utilizing a third-party credit reporting agency and/or to obtain a criminal background check. Guarantor acknowledges receipt of the Merchant Agreement, which is incorporated herein by reference as if fully set forth herein and has reviewed the Continuing Unlimited Guaranty provisions therein.		
Authorized Signature of Guarantor: (Do Not Include Title)	Guarantor Name:	Date of Signature:
Home Address	City, State, ZIP:	
Date of Birth:	Social Security Number:	Phone #:
SECTION 11 PATRIOT ACT AND BACKGROUND AUTHORIZATION		
To help the government fight the funding of terrorism and money laundering activities, the USA Patriot Act requires all financial institutions to obtain, verify and record information that identifies each person (including business entities) who opens an account. What this means for you: When you open an account, we will ask for your name, physical address, date of birth, taxpayer identification number and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. The undersigned entity(ies) and individuals hereby unconditionally authorize NPC and Member Bank or its agents to (i) investigate the information and references contained herein, and to obtain additional information about the Merchant and such individual(s) by pulling credit bureau and criminal background checks on the Merchant and its principals, including obtaining reports from consumer reporting agencies on individuals signing below as an owner or general partner of Merchant, or providing their Social Security Number on the Application (if such individual asks NPC or Member Bank whether or not a consumer report was requested, NPC and/or Member Bank will tell such individual and, if NPC and/or Member Bank received a report, NPC and/or Member Bank will give the individual the name and address of the agency that furnished it) and (ii) update such information periodically throughout the terms of service of the Merchant Agreement. By providing your SSN and signing this Application, you, in your individual capacity, unconditionally authorize NPC and Member Bank to obtain your consumer credit report.		
SECTION 12 MERCHANT ACKNOWLEDGEMENTS AND SIGNATURE		
Merchant agrees to and accepts the terms and conditions set forth in this Application and the Terms and Conditions which are incorporated herein by reference (GEN.0718) as if fully set forth herein (collectively, the "Merchant Agreement") and acknowledges receipt of all parts of the Merchant Agreement. Merchant acknowledges that no handwritten changes have been made to the printed text of the Merchant Agreement and that the parties may produce and rely on a copy or electronically stored image of the Merchant Agreement for all legal purposes. Merchant represents, warrants and certifies to NPC and Member Bank that it has reviewed all pages of this Application, that all information provided herein is true, correct and complete and that NPC and Member Bank may rely on the information contained in this Application, without further investigation, for all purposes. Merchant acknowledges and agrees that NPC and Member Bank are in no way responsible or liable for the actions, inactions, performance or lack of performance of any third party provider or independent sales representative. Merchant represents that it has chosen for itself any services, equipment or third party selected in connection with the Merchant Agreement, and it has not relied on any promises, representations, warranties, or covenants of the independent sales representative, NPC or others. Merchant acknowledges and agrees that the Merchant Agreement shall not be altered by any prior, contemporaneous or subsequent oral representations made by any party. Merchant further authorizes the release of Merchant information in accordance with the provisions of Section 10 of the Terms and Conditions. If Merchant does not want to participate in the American Express Program, the applicable Opt Out Box has been marked.		
IN WITNESS WHEREOF Merchant has caused this Agreement to be executed by its duly authorized representative effective in accordance with the terms of the Terms and Conditions. The Agreement shall be binding upon Merchant upon the earlier of Merchant's execution below or Merchant's first processed electronic transaction.		
MERCHANT		
Signature (Signature may be evidenced by facsimile) X	Name (please print)	Date

Merchant's Business Name (Legal): JACQUI FORD LAW

SECTION 13 EQUIPMENT SETUP PROVIDER CODE: NPC = NPC to ship equipment SOF = Sales office to ship equipment MER = Merchant owned

TERMINAL	QTY	PROVIDER CODE	PRINTER	PROVIDER CODE	PIN PAD	PROVIDER CODE
SWIPESIMPLE SWIFT B250	1	MER			<input type="checkbox"/> NEW <input type="checkbox"/> EXCHANGE	
					<input type="checkbox"/> NEW <input type="checkbox"/> EXCHANGE	
					<input type="checkbox"/> NEW <input type="checkbox"/> EXCHANGE	

Other: Provider Code: Other: Provider Code: Other: Provider Code:

EQUIPMENT SOFTWARE INFORMATION	SOFTWARE NAME	PUBLISHER	VERSION

EQUIPMENT OPTIONS THE DEFAULT SELECTION WILL BE APPLIED FOR ANY OPTION NOT SELECTED BELOW

<input type="checkbox"/> RETAIL/MOTO AVS <input type="checkbox"/> YES <input type="checkbox"/> NO Last 4-Digits <input type="checkbox"/> YES <input type="checkbox"/> NO CVV 2 <input type="checkbox"/> YES <input type="checkbox"/> NO Purchase Card/Level 2 <input type="checkbox"/> YES <input type="checkbox"/> NO Invoice # Prompt <input type="checkbox"/> YES <input type="checkbox"/> NO PBX Code <input type="checkbox"/> 8 <input type="checkbox"/> 9 Multi-Merchant <input type="checkbox"/> YES <input type="checkbox"/> NO First Merchant MID _____	Auto-Close++ <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO TIME 1930 Store N Forward <input type="checkbox"/> YES <input type="checkbox"/> NO Pre-Dial <input type="checkbox"/> YES <input type="checkbox"/> NO Cash Back <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Debit Cash Back <input type="checkbox"/> 0 Max Amount _____ ++ Auto-Close Time for Alternate Funding needs to be no later than 7:30 p.m. CST	<input type="checkbox"/> RESTAURANT Tips <input type="checkbox"/> YES <input type="checkbox"/> NO Servers <input type="checkbox"/> YES <input type="checkbox"/> NO Tables <input type="checkbox"/> YES <input type="checkbox"/> NO Bar Tab <input type="checkbox"/> YES <input type="checkbox"/> NO Suggested Tip <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> FAST PAY (FPS) <input type="checkbox"/> Both receipts signature line <input type="checkbox"/> Both receipts NO signature line <input type="checkbox"/> NO receipts under \$25.00	<input type="checkbox"/> CASH ADVANCE <input type="checkbox"/> LODGING FUEL <input type="checkbox"/> YES <input type="checkbox"/> NO PASSWORD All <input type="checkbox"/> YES <input type="checkbox"/> NO Void <input type="checkbox"/> YES <input type="checkbox"/> NO Return <input type="checkbox"/> YES <input type="checkbox"/> NO Settlement <input type="checkbox"/> YES <input type="checkbox"/> NO Other _____
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Custom Header / Footer: Wireless ID: Comments:

EQUIPMENT SHIPPING INSTRUCTIONS Required ONLY if ordered through NPC - Default shipping options (indicated by *) will be applied for any option not selected below

Ship To: Do Not Ship Merchant Location * ISO Location Other 1-3 Day Over Night Priority * Ground Saturday

Attn: Payment For Equipment Will Be: Lease Check Cash Visa MC Discover Amex 30 day (Bill Group)

Address: City: State: Zip: Phone #: Special Instructions:

NPC TO REPROGRAM/TRAIN MERCHANT? YES NO
 NPC TO SHIP WELCOME KIT? YES NO

WELCOME KIT SHIPPING INSTRUCTIONS Required if welcome kit is shipping to separate address from above

Ship To: Merchant Location * ISO Location Other Attn: Phone #:

Address: City: State: Zip:

SECTION 14 SITE INSPECTION INFORMATION

I represent and warrant that the information set forth in the application is true and accurate to the best of my knowledge. In addition, I hereby certify that (check which applies):

<input checked="" type="checkbox"/> I have physically inspected the business premises of the merchant at this address, personally confirmed the identity of the person listed in the Control Owner/Officer Information Section, and witnessed their signing of the Agreement. <input type="checkbox"/> An NPC approved third party site inspection vendor will supply inspection within 15 days of my signature below or I have informed NPC that a site inspection is needed. <input type="checkbox"/> I have not physically inspected the business premises of the Merchant; but have verified the validity of the business using outside sources and confirmed the identity of the person listed under the Control Owner/Officer Information Section.	Business / Inventory / Shipments: Does business appear as represented? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Is business open and operating? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Is inventory sufficient for business type? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Are goods and services delivered at the time of sale? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Goods and services charged to credit card on <input checked="" type="checkbox"/> Order <input type="checkbox"/> Shipment Are good and services delivered <input type="checkbox"/> Digitally <input checked="" type="checkbox"/> Physically <input type="checkbox"/> Both If goods are shipped, is a Fulfillment House used? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
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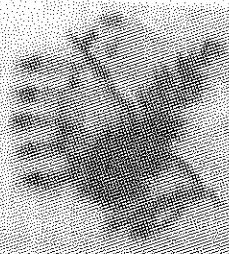
If Fulfillment House is used, please complete the following:

Fulfillment House Name and Address: Fulfillment House Contact information:

Is Fulfillment House PCI DSS Compliant? YES NO % of shipments by this vendor

Location Type: Retail Store Front Office Building Residence Industrial Building Trade Show

Sales Organization: IMPACT PAYSYSTEM LLC Sales Rep Signature: Application Date: 9/17/2019



Oklahoma

Driver License



DOB 01/13/1979

SEX F

EXP 02/27/2018

RESTRICTIONS NONE

CLASSIFICATION FORD

NAME JACQUELYN LESLIE

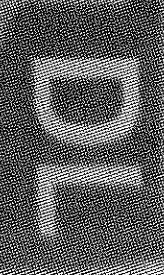
ADDRESS 1220 WILSHIRE BL. VD

CITY NICHOLS HILLS, OK 73118-0000

Jacquelyn Ford

0001072112

SEX F HT 5-02 WT 140lb EYES BLD



ISS. No. D0810K2112
DOB 01/13/1979
EXP 02/27/2018
END NONE

Attached Document Checklist
 Voided Check
 Copy of Drivers License

Fax to: 901-692-9499
email to: applications@impactpays.net



Merchant Application Submission Form

Merchant (Business) DBA Name: _____

Business Legal Name: Jacqu Ford Law

Contact Name: Tennifer Reser

Physical Address: 1621 N. Classen Blvd

Phone Number: 405-604-3200

Email Address: JENNIFER@FORDLAWOKC.COM

Billing Address: 1621 N. Classen Blvd

State: OK

Business Start Date: _____

Business Type: PC

Business Type: Law Firm

Length of Ownership: _____

% of Business Owned: 100%

Types of Goods Sold: Legal Services

Refund Policy? NA

Ownership Information

Title: Owner

Social Security: 498-97-7989

City, State, Zip Code: Oklahoma Hills, OK 73116

Home Address: 1220 W. Oklahoma Blvd

Drivers License #: DD81Q7212

DOB: 01/12/1979

Bank Reference (a copy of a voided check or a DDA verification letter from the bank is required)

Name of Bank: Midfirst Bank

City: Oklahoma City

ABA Routing #: 3030870995

Account #: 6701012479

Estimated Annual Sales (All sales)

Estimated Visa/MC/Discover Sales

Estimated Amex Sales

Average Ticket

**Highest Ticket

% Card Swiped

% Card Keyed In

% Card Present

% Card Not Present

% MOTO

% Internet

% B2B

% International Cards

Managing Partner Name: NA BRET BLENN

Date Submitted: 5-16-15

Date Received: _____

Date Keyed: _____

IC + : _____

Statement: _____

Gateway: _____

Return Item: _____

Chargeback: _____

Minimum: _____

Terminal Questions

Batch Out Time: 8:00 P.M.

Communication Method: IP

Do you dial 9 for outside lines? NO

Terminal Type: None

Equipment Purchase: SWIPE SIMPLE 131

Equipment Replacement Program: When available

PIN Debit Pin Pad:

POS SOFTWARE:

Software Name & Version: _____

Next Day Funding (Yes or No): YES

Tip Edit (Yes or No): NO

Internal Use Only

Date Approved: _____

Trans Fee: _____

AOF: _____



1164 VICKERY LANE
 SUITE 200
 CORDOVA, TN 38016
 TOLL FREE: 800.251.0778
 Local: 901.601.0032
 FAX: 901.692.9499

BankCard Processing Savings Analysis Detail

Jacquelyn L Ford PC

FD

IMPACT PAYSYSTEM

FEE TYPE	Sale Amount	Trans	Disc Rate	Item Rate	Fees	Disc Rate	Item Rate	Fees
Qualified Visa/MC/Disc	\$ 1,090.00	7	3.28%	\$ 0.19	\$ 37.08	0.40%	\$ 0.20	\$ 5.76
Non Qual Visa/MC/Disc	\$ 14,500.00		4.28%	\$ 0.19	\$ 620.60	0.40%	\$ 0.20	\$ 58.00
Amex	5,000.00		0.55%	\$ 0.19	\$ 27.50	0.40%	0.20	\$ 20.00
Interchange Pass Thru Fees					\$ 160.24	\$ 474.38		



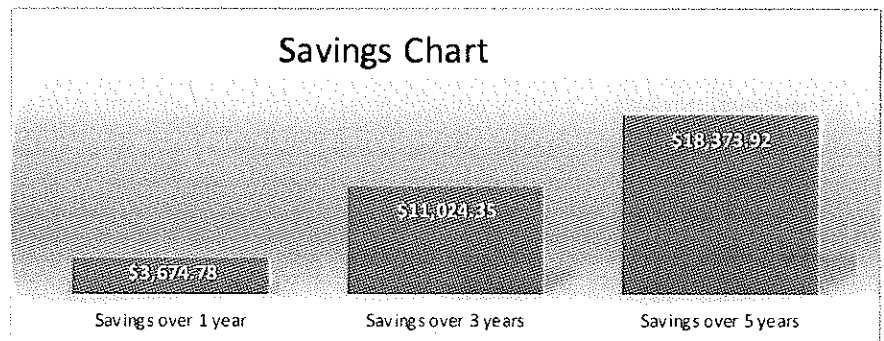
PROCESSING FEES

Payeezy Monthly	\$	9.95	
Annual Fee/ Monthly			
Monthly Fee			\$ 10.00
PCI	\$	29.95	\$ 10.95
TOTAL FEES	\$	885.32	\$ 579.09

Swipe Simple Pricing

TOTAL COST COMPARISON

Current Charges:	\$885.32
Impact Offer:	\$579.09
Savings Amount	\$ 306.23
Savings in Percentage	35%
Savings over 1 year	\$ 3,674.78
Savings over 3 years	\$ 11,024.35
Savings over 5 years	\$ 18,373.92



This proposal is **CONFIDENTIAL** and are intended solely for the use of the individual to whom it is addressed. This pricing is valid for 30 days.

This proposal is based on projection on qualification on interchange rates for each association based on provided details.

Impact PaySystem is a registered ISO/MSP of the following Banks: Wells Fargo, US Bank and 5/3.



1164 VICKERY LANE
 SUITE 200
 CORDOVA, TN 38016
 TOLL FREE: 800.251.0778
 Local: 901.601.0032
WWW.IMPACTPAYS.COM

Jacquelyn L Ford PC

TOTAL COST COMPARISON ANALYSIS



Current Charges	\$	885.32
Impact PaySystem Charges	\$	579.09
Monthly Savings Amount	\$	306.23
Savings in Percentage		35%
Savings over 1 year	\$	3,674.78
Savings over 3 years	\$	11,024.35
Savings over 5 years	\$	18,373.92

Savings Chart



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Ghost Sheet

In order to get our Merchants, set up seamlessly and effortlessly we need as much information as you can upfront. Please fill out all applicable fields.

- How does the merchant process cards today?
 - Terminal: Yes No Make/ Model: _____
 - POS System? Yes No Name: _____
 - Payment Gateway or Online Shopping Cart? (such as Auth.net, USA ePay, Shopify etc.)
 Yes No Name: PAYEEZ Portal - First Data
 - Any other Software? _____

- Does the Merchant want to keep their current equipment? Yes No *They have no equipment*
 - Front & Back picture of terminal attached
- Line of communication: Is Merchant using IP (Internet wire connected to the internet router) or Dial (phone line) for internet access? IP Dial
- Does Merchant accept Gift Cards or want to accept them? Yes No Wants
- Does Merchant have a need for ACH reoccurring billing Yes No Wants
- Does Merchant need Next Day Funding Yes No Wants

They want DOUBLE.

JACQUELYNLFORD P.C.

Bret Glenn Referral

JACQUELYN FORD LAW PC
1621 N. CLASSEN BLVD
OKLAHOMA CITY, OK 73106

2130

19-0799-2130

67

Pay to the
Order of

~~2130~~

Date

CHECK NUMBER

\$

Dollars



Member
Savings
and
Investment
Services

MIDFIRST
BANK

119 N. Robinson, Oklahoma City, Oklahoma
www.midfirst.com
405.543.8002

For

⑆3030879951⑆2130⑆⑆6701012479⑆



Aimee Jones <aimee@impactpays.com>

Jacqui Ford Social Security number

1 message

Legalair <legalair@yahoo.com>
To: applications@impactpays.net

Mon, Sep 16, 2019 at 4:37 PM

It was inadvertently left off the application. Her Social Security number is
448947984
Sincerely,

Bret A Glenn
GLENN LEGAL GROUP, LLC
400 N Walker Ave., Suite 260
Oklahoma City, OK 73102
(405) 702-4980
(405) 702-4984 fax
legalair@yahoo.com

Sent from my iPhone