

Services Application

BUSINESS INFORMATION								
<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Non Profit/Trust	<input type="checkbox"/> Government	<input type="checkbox"/> Publicly-Traded	Stock Symbol (if publicly-traded)		
Corporate / Legal Name			DBA Name					
Physical Address			City	State	ZIP Code			
Billing Address (if different)			City	State	ZIP Code			
Phone Number	Fax Number	Customer Service Phone Number		Website Address / URL				
Federal Tax ID Number		Date Formed		Length of Current Ownership				
Primary Contact Name		Title	Phone Number	Email Address				
Secondary Contact Name		Title	Phone Number	Email Address				
Number of Locations	Days & Hours of Operation		Time Zone	<input type="checkbox"/> EST	<input type="checkbox"/> CST	<input type="checkbox"/> MST	<input type="checkbox"/> PST	<input type="checkbox"/> HST

OWNER / OFFICER INFORMATION				
Please complete the fields below. The information you provide will be held in strict confidence. If you entered your Stock symbol on page 1, you may skip this section.				
Primary Officer / Owner Name		Title	Ownership %	Social Security Number
Home Address		City	State	ZIP Code
Date of Birth	Home Phone Number	Email Address		
Secondary Officer / Owner Name		Title	Ownership %	Social Security Number
Home Address		City	State	ZIP Code
Date of Birth	Home Phone Number	Email Address		

BANKING INFORMATION (SETTLEMENT ACCOUNT)			
Bank Name	Bank Officer Name		Phone Number
Bank Address	City	State	ZIP Code
Name On Bank Account	ACH Routing Number (9-digit)	Bank Account Number	
Name of Authorized Signature(s) on File			

SIGNATURES

On behalf of the foregoing legal business ("Merchant"), to induce Jack Henry & Associates, Inc., acting through its ProfitStars™ division ("JHA") reliance thereon, the undersigned certifies the accuracy of all the foregoing information and authorizes JHA, Bank, Credit Bureau, or other investigative agency contracted by JHA to investigate any and all references, statements or other data contained herein or obtained from Merchant, other persons, companies or agencies pertaining to Merchant's and/or Guarantor's credit, financial responsibility and accuracy of any of the foregoing information. The undersigned further agrees to notify JHA of any and all changes which may occur from time to time in the information and statements contained herein. The person(s) signing this agreement certifies that he/she is authorized to enter into this agreement on behalf of Merchant.

WARRANTY OF APPLICATION: In connection with this Agreement, Merchant has executed and delivered an application to JHA containing, among other things, information describing the nature of Merchant's business and, where applicable, the individuals who are Merchant's principal owners. Merchant warrants to JHA that all information and statements contained in such application are true, correct, and complete. Merchant further agrees to notify JHA promptly of any changes which may occur from time to time regarding any information contained in such application, including, but not limited to, the identity of the principal owners, type of goods and services provided and how sales are completed. Merchant and principal owner(s) identified on approved applications shall be jointly and severally liable to JHA and remain liable for any and all loss, costs and expense suffered or incurred by JHA.

Primary Signature X	Secondary Signature X
Print Name _____ Date _____	Print Name _____ Date _____
Title _____	Title _____

CORPORATE RESOLUTION ADOPTED BY A QUORUM OF THE BOARD OF DIRECTORS (Required for Corporations)	
It has been resolved that the Officer(s) listed above have the authority to execute the "ProfitStars™ ACH Services Application", "ProfitStars™ ACH Services Agreement", and all of its associated supporting documents. Adopted by Board of Directors on: _____ (date).	
President X Print Name _____	Secretary X Print Name _____

I understand that our company must comply with the then-current NACHA Rules which apply to ACH Transactions.

- I have a copy of the most recent ACH Rules (A Complete Guide to Rules & Regulations Governing the ACH Network)
- I have ordered a copy of the most recent ACH Rules (A Complete Guide to Rules & Regulations Governing the ACH Network)

Sales Representative (Individual Name & Company Name)

To Be Completed by ProfitStars

Accepted by: _____
Signature: _____
Date: _____