



Merchant ID (8 or 16 digit) # \_\_\_\_\_

Sales Representative \_\_\_\_\_

Agent Initials

**ADDENDUM FOR BANK CHANGE REQUEST****\*\*THIS FORM MUST BE SIGNED BY AUTHORIZED PRINCIPAL ON MERCHANT APPLICATION\*\*****MERCHANT INFO ( \* Indicates a Required Field )**

|                            |                                                                                |                                  |                                                                              |
|----------------------------|--------------------------------------------------------------------------------|----------------------------------|------------------------------------------------------------------------------|
| <b>GENERAL INFORMATION</b> | Legal Business Name: (This field cannot be modified without a new application) |                                  | *Doing Business As Name (As it appears on the receipts):                     |
|                            | Legal Address:                                                                 |                                  | *DBA Address: (Physical Location of Terminal and Business other than PO Box) |
|                            | City/State/Zip:                                                                |                                  | *City/State/Zip:                                                             |
|                            | Contact Name/Title:                                                            | Legal Business or Contact Phone: | *DBA Business Phone:                                                         |

**BANKING INFO ( \* Indicates a Required Field )**

|                                                                                                                                                                                                                                                                |                                                      |                             |                                    |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|-----------------------------|------------------------------------|
| <b>In accordance with the terms set out herein and in the AGREEMENT, transfer funds to/from the account set out below<br/>(In case of discrepancy, the data in the attached bank instrument or in the attached bank letter will be assumed to be correct):</b> |                                                      |                             |                                    |
| <b>BANKING INFORMATION</b>                                                                                                                                                                                                                                     | *Previous Bank Name:                                 |                             | *New Bank Name:                    |
|                                                                                                                                                                                                                                                                | *Previous ACH Routing Number:                        |                             | *New ACH Routing Number:           |
|                                                                                                                                                                                                                                                                | *Previous DDA Account Number:                        |                             | *New DDA Account Number:           |
|                                                                                                                                                                                                                                                                | *Bank Contact Representative : (First and Last Name) | *Bank General Phone Number: | *Bank Contact Direct Phone Number: |

The MERCHANT designated below desires to effect settlement of credits and debits from MERCHANT's DESIGNATED ACCOUNT by means of ACH and/or wire transfer in conjunction with the processing of SALES transactions or SERVICES as anticipated by the Merchant Transaction Processing Agreement ("AGREEMENT"). In accordance with this desire, MERCHANT authorizes First National Bank of Omaha (hereafter known as "FNBO" or "BANK") and/or TSYS Merchant Solutions, LLC ("TMS") to initiate debit and credit entries to the DESIGNATED ACCOUNT (the details of which are set out herein and in the Merchant Application). MERCHANT agrees to maintain sufficient funds in DESIGNATED ACCOUNT to cover debit transactions. By signing this ACH AGREEMENT, MERCHANT states that it has authority to agree to such transactions and that the DESIGNATED ACCOUNT indicated is a valid and legitimate account for the handling of these transactions. This authority is to remain in effect until BANK and/or TMS receives written notice from MERCHANT revoking it. This authorization is for the payment of SALES, returns and FEES, CHARGEBACKS, or any other sums owed between TMS, BANK and MERCHANT. MERCHANT also certifies that the appropriate authorizations are in place to allow MERCHANT to authorize this method of settlement. All changes to the identification of the DESIGNATED ACCOUNT under this authorization must be made in writing in accordance with AGREEMENT. MERCHANT agrees that if the DESIGNATED ACCOUNT is an IBA and MERCHANT closes the IBA, the DESIGNATED ACCOUNT shall become the Home Account without further written notification and these instructions will apply. MERCHANT understands that if the information supplied as to the ABA Routing Number and Account Number of the DESIGNATED ACCOUNT is incorrect, and funds are incorrectly deposited, BANK and/or TMS will attempt to assist MERCHANT in the recovery of such funds but has no liability as to restitution of the same. BANK's and/or TMS's assistance in recovering the funds, where available, will be billed to MERCHANT at BANK's and/or TMS's current hourly rate for such work. MERCHANT acknowledges that the origination of ACH transactions to the DESIGNATED ACCOUNT must comply with the provisions of U.S. law. Capitalized terms not defined herein shall have the same meaning ascribed to them in the AGREEMENT. You understand that you will be considered the Receiver of all ACH entries submitted hereunder, and agree to comply with all rules and operating guidelines of the NACHA Rules and other relevant clearing house associations which are applicable to Receivers, as the same may be applicable to transactions processed hereunder.

|                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               |       |
|----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------|
| <b>MERCHANT ACCEPTANCE</b> | THE UNDERSIGNED GUARANTORS ACKNOWLEDGE AND AGREE TO BE BOUND BY ALL THE TERMS AND CONDITIONS OF THE PREEXISTING MERCHANT AGREEMENT AND UNCONDITIONALLY GUARANTEE THE PERFORMANCE OF THE EXISTING AGREEMENT. BY ITS EXECUTION BELOW, MERCHANT AGREES THAT THIS IS AN ADDENDUM TO THE EXISTING MERCHANT APPLICATION. THE MERCHANT AUTHORIZES TSYS TO MODIFY THE DDA ACCOUNT NUMBER AND ACH ROUTE NUMBER ON THE MERCHANT ACCOUNT. <b>FUNDS TRANSFER:</b> IN ACCORDANCE WITH THE TERMS SET OUT IN THE TERMS AND CONDITIONS, TRANSFER FUNDS WILL BE MADE TO/FROM THE ACCOUNT SET FORTH IN THE ENCLOSED/ATTACHED VOIDED CHECK OR BANK LETTER. |               |       |
|                            | *Authorized Signature of Principal on Contract                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | *Print Name   | *Date |
|                            | *Contact Phone Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Email Address |       |
|                            | <b>*Indicates Required Field</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |               |       |

Email form along with a VOIDED CHECK or SIGNED BANK LETTER to [partnerbankchanges@tsys.com](mailto:partnerbankchanges@tsys.com) attention "Bank Changes", or fax to (866) 908-4707. The turnaround-time is typically 1 – 3 business days.

Please call (800) 449-8012 ext. 7381 after this time period to verify the status of this request.

**v0126**