



Strategic Payment Systems

PURCHASE AGREEMENT AND RECEIPT FOR FUNDS

Legal Name _____ DBA _____

Street _____ City _____ State _____ Zip _____

Telephone () _____ SPS Rep _____ Date _____

REFERRING AGENT: _____

The undersigned ("Merchant") agrees to purchase the following goods and services from Strategic Payment Systems:

QTY	DESCRIPTION	EACH	EXTENSION	<input type="checkbox"/> Void check or Bank Letter (no deposit slips)	
VS MC AMEX DISC					
CARD #: _____ EXP: _____		SUBTOTAL	\$	AMOUNT RECEIVED	
NAME: _____ CVV: _____		SALES TAX	\$		
BILLING ADDRESS: _____		TOTAL	\$		
ZIP CODE: _____		TOTAL	\$		
			\$	\$	

Merchant hereby authorizes Strategic Payment Systems to initiate and/or transmit automatic credit and/or debit entries to the Account and Depository identified in the attached voided check (hereinafter, "Merchant's Account"). Said authority includes, but is not limited to, the initiation on and transmission of such entries, requests, or orders as may be necessary to charge Merchant's Account for any fees, including a \$50 annual fee, or other amounts payable by Merchant to Strategic Payment Systems under the terms of the Merchant Bankcard Agreement and Purchase Agreement, to initiate and transmit such entries, requests or orders as may be necessary to reverse or adjust any entries made in error or by mistake, and to initiate, transmit or suspend such entries, requests or orders as may be necessary to grant or effect or revoke conditional credit with respect to any entry or group of entries. Strategic Payment Systems agrees to be bound by all NACHA rules. If the merchant is entering into a lease, the merchant understands that Strategic Payment Systems, Inc. is NOT a party to the lease in any way. The lease is solely between the merchant and the leasing company only.

PAYMENT TO BE AS FOLLOWS:

- _____ () **CHECK (made payable to Strategic Payment Systems).**
 INIT. _____ Initial Deposit \$ _____. Balance due; see promissory note below.
- _____ () **EFT Authorization Form (Please attach completed form, signed by the merchant)**
 INIT. _____
- _____ () **LEASE PURCHASE:**
 INIT. _____ I agree to a non-cancelable lease for a period of _____ months, at a monthly lease amount of \$ _____.
 The initial deposit for this lease is \$ _____ and the check is made payable to _____

Merchant's Signature _____ Title _____

Printed Name _____ Date _____