



AUTHORIZATION & REPRESENTATIONS

IMPORTANT: To complete your online registration, submit to Vanco Payment Solutions the following items. You can submit these items using our secure upload at <https://vsllc.co/upload> (scan the items and follow the onscreen instructions to upload the files) or you can send a fax to **651-288-1124** (attention: Vanco Sales Department).

Items to be submitted:

- This Authorization and Representations form
- A voided check to verify your organization's routing and account numbers
- A copy of the 1st page of your organization's most recent bank statement to verify the account
- A copy of your organization's 501(c)(3) or 501(c)(4) form (**not required for churches**)

The undersigned represents that all of the following are true:

1. I represent that I have all necessary authority to execute this document on behalf of the Organization.
2. The Organization authorizes Vanco Payment Solutions, LLC to initiate VARIABLE transactions to the account identified in the Banking Information section of this Application for the SETTLEMENT OF TRANSACTIONS and the collection of PROGRAM CHARGES AND TAXES pursuant to the Agreement(s) for the product(s) for which the Organization has applied. If this Application is approved, this Authorization will remain in effect until Vanco Payment Solutions, LLC is notified, in writing, to discontinue.
3. I hereby certify the information contained in this Application is complete and accurate. I authorize Vanco Payment Solutions, LLC and/or its agent(s) to investigate the Organization identified in this Application. I understand that such information will be utilized by Vanco to determine credit worthiness as part of Vanco's determination of whether it will provide services to the Organization.
4. I understand that the Organization is identified as "COMPANY" in the Agreement(s) and Addendum(s) which I have reviewed. My signature below as well as Company's use of the products constitutes acceptance of all of the terms and conditions of such Agreement(s) and Addendum(s). My signature below is the same as if I physically signed such Agreement(s) and Addendum(s).

COMPANY

(Legal Business Name)

By _____
(Company Officer's Signature)

(Company Officer's Printed Name)

Its _____ Date _____
(Company Officer's Title)

NP – Revised 01/01/15

FOR VANCO USE ONLY:

Company's application for the following product(s) has been approved:

Plan 1 Plan 2 Plan 3 All Plans are comprised of eCheck, Credit and Debit Card Processing and WebPay

The undersigned's signature shall also be deemed to be the signature of the Agreement(s) and Addendum(s) for the product(s) approved by Vanco Payment Solutions, LLC has set forth above as if the undersigned physically signed copies of such Agreement(s) and Addendum(s).

VANCO PAYMENT SOLUTIONS, LLC

By _____
(Vanco Payment Solutions, LLC Officer's Signature)

(Vanco Payment Solutions, LLC Officer's Printed Name)

Its _____
(Vanco Payment Solutions, LLC Officer's Title)

Dated: _____