

Bank Name: **JPMorganChase N.A.**
Bank Address: **1 Western Maryland Parkway**
Hagerstown, MD. 21740
Bank Phone: **301-766-5366**
Contact: **Priority Manager**

Important Member Bank Responsibilities:

1. The Bank is the only entity approved to extend acceptance of Association products directly to a Merchant.
2. The Bank must be a principal (signer) to the Merchant Agreement.
3. The Bank is responsible for educating Merchants on pertinent Association Rules with which Merchants must comply.
4. The Bank is responsible for and must provide settlement funds to the Merchant.
5. The Bank 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 chargebacks below thresholds.
3. Review and understand the terms of the Merchant Agreement.
4. Comply with Association rules.

Print Client's DBA/Outlet Name: _____

Print Client's Legal Name: _____

Address: _____

City/State/Zip: _____

Business Phone: _____

By its signature below, Client acknowledges that it has received (either in person, by facsimile, or by electronic transmission) the complete Merchant Processing Agreement and a copy of the Association Disclosure page.

Client further acknowledges reading and agreeing to all terms and conditions, which shall be incorporated into Client's Agreement. Upon receipt of a signed facsimile or original of this Confirmation Page by us, Client's Application will be processed.

Client's Business Principal:
Signature (Please sign below):

X _____

Title: _____ **Date:** _____
