

# T & E ADDITIONS AND CHANGES FORM

**Fax completed requests to (703) 991-5374**

If you have questions, contact Client Services at (800) 261-0240, option #3

**\*\* Please allow three (3) to five (5) business days to evaluate your request. \*\***

FOR OFFICE USE ONLY			
OFFICE NAME	OFFICE ID	REP NAME / ID #	APP ID #
<b>MERCHANT INFORMATION</b>			
MERCHANT ID #		DBA NAME	
ADDRESS			
CITY		STATE	ZIP CODE
CONTACT NAME		PHONE NUMBER	
EMAIL ADDRESS		FAX NUMBER	

ADDITIONAL CARD SERVICES		
CARD TYPE	ACCOUNT NUMBER	PER ITEM FEE
<b>AMERICAN EXPRESS</b>		
<input type="checkbox"/> ADD <input type="checkbox"/> CHANGE <input type="checkbox"/> REMOVE		\$
<b>DINERS</b>		
<input type="checkbox"/> ADD <input type="checkbox"/> CHANGE <input type="checkbox"/> REMOVE		\$
<b>CARTE BLANCHE</b>		
<input type="checkbox"/> ADD <input type="checkbox"/> CHANGE <input type="checkbox"/> REMOVE		\$
<b>JCB</b>		
<input type="checkbox"/> ADD <input type="checkbox"/> CHANGE <input type="checkbox"/> REMOVE		\$
<b>DISCOVER</b>		
<input type="checkbox"/> ADD <input type="checkbox"/> CHANGE <input type="checkbox"/> REMOVE		\$

*\*Unless otherwise specified above or on your original Merchant Application in the T&E section, per item fees will be assessed at the same rate as your current V / MC per item fees.*

SIGNATURE AND ACCEPTANCE	
IN ACCORDANCE WITH THE TERMS SET OUT ABOVE, I AUTHORIZE THE ABOVE CHANGE(S):	
MERCHANT'S SIGNATURE <b>X</b>	MERCHANT'S NAME (PLEASE PRINT) <b>X</b>
DATE: <b>X</b>	MERCHANT'S TITLE (PLEASE PRINT) <b>X</b>