|  |  |  |
| --- | --- | --- |
| Date: |  |  |

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|  | | | | | | | | | |  |
|  | Outlet Only | MID #: | |  | |  | | | |  |
|  | | | | | |  | | | | |
| Business DBA/Legal Name: | | |  | | | | | | | |
| \*Person Requesting Change: | | |  | | Title: |  | Phone #: | |  | |
| \*Person should be Owner, Officer or Legal Contact. Does not include Manager, Clerk etc. | | | | | | | |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
|  | EBT Cash Benefits Only |  | EBT Cash Benefits and Food Stamps |

|  |  |  |  |
| --- | --- | --- | --- |
|  | FNS # (Food Stamps Only) |  | SE Number |
| Comments: | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sequence Code** | **New Value** |  | **Frequency Ind**  **Defines Billing cycle**  **Options: M, Monthly**  **D, Daily**  **S, Settlement** | **Fee Processing Ind**  **(Default is 1)**  **Defines which DDA to use** |
|  |
|  |
|  |
| 18E | $0.05 |  | M | 1 |
| 18I | $0.05 |  | M | 1 |
| 18H | $0.05 |  | M | 1 |
| 02X | $0.05 |  | M | 1 |
| 02Y | $0.05 |  | M | 1 |
| 029 | $0.05 |  | M | 1 |

|  |  |  |  |
| --- | --- | --- | --- |
| **Note to RM:** | | | |
|  | Legal Addendum sent |  | Signed Legal Addendum received |

|  |  |  |  |
| --- | --- | --- | --- |
|  | | | |
| Merchant Signature (Required) |  | Date: |  |
| Channel Approval Signature (if applicable) |  | Date: |  |
| Channel Email Address (Required) | support@integritymerchantsolutions.com |  | |