

Merchant Services • 4 Northeastern Boulevard, Salem, NH 03079-1952 • www.chasepaymentech.com • Phone: (603) 896-6000 • Fax: (603) 896-8715 • Merchant_Services@ChasePaymentech.com EU Merchant Support • Block K, East Point Business Park, Dublin 3, Ireland • www.chasepaymentecheurope.com • Phone: +353 1 726 2909 • Fax: +353 1 889 3156 • EUMerchantSupport@ChasePaymentech.com

Bank Account Add/Change Form

Company Legal Name:

Contact Name:

Phone #/No:

(Include Country code)

Company #/No:

Note: When setting up multiple bank accounts, please complete a separate form for each.

Please specify FTI# or BU# below for which changes will apply.

Funds Transfer Instructions Number (FTI#) or Business Unit Number (BU#) (Required for merchants with multiple FTI's)

New FTI's may be created to support hierarchy structure and may require changes to reporting.

Check only one of the 7 options below	Settlement Currency in which we will fund to you	Deposit (Country where your Bank Acct Resides)	Complete all sections listed:
Option #1	USD	USA	A, E
Option #2	CAD	CAN	B1 to B3, E
Option #3	USD	CAN	B1 to B3, D3, D4, E
Option #4 🗌	USD	Int'l (list country funds are being deposited in)	C1 to C3, D3, D4, E
Option #5 🗌	□Euro, □GBP, □ JPY, □AUD, □HKD, □DKK, □CHF, □NOK, □SEK, □NZD □ZAR	Euro Bank or <u>SAME</u> as presentment/settlement currency	C1 and/or C2, C3, E
Option # 6	□Euro, □GBP, □ JPY, □AUD, □HKD, □DKK, □CHF, □NOK, □SEK, □NZD, □ZAR	If DIFFERENT than Settlement Currency Int'l (list country funds are being deposited in)	C1 and/or C2, C3, D1 and/or D2, D4, E
Option #7 🗌	□Euro, □GBP, □ JPY, □AUD, □HKD, □DKK, □CHF, □NOK, □SEK, □NZD, □ZAR	CAN	B1 to B3, D1, D4, E

SECTION A: US BANK ACCOUNT INFORMATION											
(select only one method of transfer)											
ACH Transfer										(ABA ‡	#)
Wire Transfer (See Note)										(Fedw	ire#)
BIC/Swift Transfer (See Note)										(BIC/Sv	vift 8 to 11 bytes)
Please Note: BIC/Swift code is required if your division is located outside of the US or Canada and is settling funds in USD. Wire transfer requires both ACH ABA Routing# and Fedwire# Special Wire Instructions: (60 bytes)											
Bank Account #: Company Name: (As appears on Bank Account) Financial Institution Name:											
City: State: Checking OR Savings		_ Zip/	Postal (Code						Country:	United States

Rev06/01/2013

Bank Change Form/cboo



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SECTION B: CANADIAN BANK ACCOUNT INFORMATION: Transfer Method EFT Only																		
B1	Institution Number:			EF	T Bra	anch T	ransit	Numb	ber:									
B2	BIC/Swift Code: (8 to 11 bytes) (required if settlement is USD)																	
B3 Bank Account # Company Name: (As appears on Bank Account)																		
Financial Institution Name:																		
City:		Prov	/ince:						I	Pos	tal Co	de:				Country:	Canada	
Che	Checking OR Savings																	
SECTION C: FINAL DESTINATION BANK																		
Account Where Your Funds are Deposited																		
C1	BIC/Swift Code: (8 to 11 by	rtes)																
C2	Sort Code: (Required in G	reat	Britair	n Only)														
C3	IBAN/Bank Account #																	
(IBAN required for all Banking located in European Union Countries)																		
-	any Name: <i>(As appears on Bar</i>	nk ad	ccount,)														_
Financial Institution Name:																		
City:		ate/F	Provinc	:e:						Pos	stal Co	ode:			_ C	ountry:		
Special Wire Instructions: (60 bytes)																		
SECTION D: INTERMEDIARY/CLEARING BANK ACCOUNT INFORMATION																		
	For Int'l Deposits going through			n Chase	in Lo	ndon, l	nterm	ediary	is no	ot re	quired	. Con	nplete	Secti	on "C	" only		
D1	BIC/Swift Code: (8 to 11 by	,																
D2																		
D3	D3 Wire Transfer: (USA Only) (Routing #)																	
D4 Financial Institution Name:																		
City:	Sta	ate/F	Provinc	;e:						Pos	stal Co	ode:			_ Co	ountry:		
Specia	I Wire Instructions: (60 bytes)																	
SECTION E: Signature																		
On behalf of I, , represent and warrant that																		
	(Mercha										ame)		,					
	the authority to change and/or r funds accordingly.	add	Dankii	ng infor	matio	n and	i verir	/ that	the a	abov	/e ban	iking i	ntorma	ation	is ac	curate and	I Should be use	ea to
Authorized Signature*						Title								Date				
(*Must be signed by Executive or Financial Contact)																		
Note: In order to process this request, please attach an original voided check (starter check and bank statements not applicable) or a bank letter of verification.																		
ATTACH VOIDED CHECK HERE																		
	<u>.</u>																[¦]	
Rev0	6/01/2013 Chase Paymentech Eu	Iropy	l imi+	ad trad	ina a	c Char	2 e Pav		h	ie ro	aulato	d by t	he Co	ntral	Bank		<u>k Change Form/</u> c	boo
	Registere	ed Of	ffice: E	astpoin	t Plaz	a, 2 nd	Floor,	East	Poin	nt Bu	sines	s Park	, Dubl	in 3, I	Irelan	id.	•	
		Regi	istered	in Irela	nd wi	th the	CRO	under	the	Reg	istratio	on No.	4741	28.				

Directors: Shane Fitzpatrick, Kevin Moran.