



FEE CHANGE AGREEMENT

General Business Information

Business DBA Name: ADAFRUIT INDUSTRIES Merchant ID #: 536385460049638

Date: _____ Sales Rep: Becky Groffman Effective Date: _____

Changes To Fees

FROM Cost Plus

☒ Cost Plus: 0.090

☐ Flat Rate: _____

☐ Tiered: _____

Qualified: _____

Qual Debit: _____

Mid Qual: _____

Non Qual: _____

☒ Transaction Fee: 0.05

☒ Statement Fee: 0.00

☒ Monthly Minimum: 0.00

☐ Pin-Debit: 0.000

☒ Pin-Debit Transaction Fee: 0.00
(Plus Debit Network Fees)

☒ EBT Transaction Fee: 0.00

☒ Amex: _____

Amex Price Structure: _____

Amex Discount Rate: 0.000

Amex Transaction Fee: 0.05

☒ Batch Fee: 0.00

☐ Other: _____

TO Cost Plus

☒ Cost Plus: 0.070

☐ Flat Rate: _____

☐ Tiered: _____

Qualified: _____

Qual Debit: _____

Mid Qual: _____

Non Qual: _____

☒ Transaction Fee: 0.0500

☒ Statement Fee: 0.00

☒ Monthly Minimum: 0.00

☐ Pin-Debit: 0.000

☒ Pin-Debit Transaction Fee: 0.0000
(Plus Debit Network Fees)

☒ EBT Transaction Fee: 0.0000

☐ EBT FNS #: _____

☐ Amex: _____

Amex Price Structure: _____

Amex Discount Rate: _____

Amex Transaction Fee: 0.0500

☒ Batch Fee: 0.00

☐ Other: _____

X

Agreement & Acceptance

I (_____), understand that by accepting the fee reduction, my Merchant Contract for processing services with Gravity Payments is renewed for a 3 year term, which begins on the date of the acceptance of this agreement. Furthermore, I understand that canceling this account before the end of term will result in an early termination fee of \$495 per account. In accordance with the terms set out above, I authorize the above change(s).

I authorize the above changes to my merchant account:

Date: _____

Authorized Signature: _____ Printed Name & Title: Limor Fried