



Dear Valued PayCloud Client:

We are pleased to be implementing PayCloud as your online payment portal. Please read the following:

ACH / Bank Draft Processing: If you plan to accept ACH / Bank Draft payments, you will be contacted by Nancy Stitt with ETS (provide contact info) to review application process.

Credit Card / PlastiQ:

Step 1: Fill out your merchant agreement:

- ✓ Fill in the yellow highlighted fields. (If upon printing the application, you do not see any highlighted fields, please view the document on your computer screen.)
- ✓ Ownership section – any signatory of the club may fill out this section. The same individual should sign the 2nd signature line on the 2nd page.
- ✓ No e-signatures or stamps will be accepted; please sign the application by hand. We do not need a personal guarantee or SSN

Step 2: Send the following documents to mids@plastiQ.com

- ✓ The completed merchant agreement application from Step 1
- ✓ A voided check ✓
- ✓ 2013 or 2014 Financials – Full fiscal year documents:
 - Income Statement ✓
 - Balance Sheet
 - Statement of Cash Flows
- ✓ In email body, include:
 - Average transaction size – typically the average monthly statement balance.
 - Maximum transaction size – typically initiation fee or a banquet. This will be the maximum ticket size you can accept through PlastiQ in a single transaction
 - Whether you have seasonal sales. If yes, please indicate which months
 - If you are a non-for-profit organization, you must submit your 990 Form

It typically takes 7-10 business days to process your application. Once approved, you can expect a welcome email with your account information, a virtual demo of the system, and a personal call from ClubSoft. If you have any questions, please email mids@plastiQ.com.

Erin Hime, Implementation Coordinator
ClubSoft North America
ehime@clubsofnorthamerica.com
704.934.2013



MERCHANT EZ APPLICATION

Additional Location <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No MID		Partner Name (If Applicable) Plastiq-197		APP ID	
Name of Account (Doing Business As) Cohasset Golf Club		Contact Kristen M. Woods		Tax Filing Name (Same as Legal Name) Cohasset Golf Club	
Address (No P.O. Box) 175 Lamberts Lane		Legal Address (No P.O. Box) 175 Lamberts Lane		Are you a Foreign Entity? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City, State/Province, Zip/Postal Code Cohasset, MA 02025		City, State/Province, Zip/Postal Code Cohasset, MA 02025			
DBA Phone NO. (781) 383-9890		Retrieval Method: <input type="checkbox"/> Mail <input type="checkbox"/> Fax <input type="checkbox"/> EIDS <input type="checkbox"/> Mail & EIDS <input type="checkbox"/> Auto Fax & EIDS		Client Contact Kristen M. Woods	
Mailing Name and Address (if different from above) ATN:		Phone NO. (781) 383-9890		Fax NO. (781) 383-2904	
Website Address www.plastiq.com		Merchant Customer Service Phone Number (781) 383-9890		Merchant Email Address kwoods@cohassetgc.org	

MERCHANT PROFILE

Type of Ownership: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company (LLC) <input checked="" type="checkbox"/> Not for Profit <input type="checkbox"/> Private Corporation <input type="checkbox"/> Public Corporation - Ticker Symbol:					
Pricing based on: <input type="checkbox"/> Retail <input type="checkbox"/> Mail/Telephone <input checked="" type="checkbox"/> eComm Basic <input type="checkbox"/> eComm Preferred (VBV) <input type="checkbox"/> IVR <input type="checkbox"/> Restaurant <input type="checkbox"/> Utilities <input type="checkbox"/> Other (Explain):					
Percent of Business:		Card Swiped %		Mail Order/Telephone %	
				eCommerce 100 %	
				Manual Key Entry with Imprint, Customer Present %	
One Time Event: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date Seasonal Sales: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No High Volume Months: May- September Dollar Volume \$					
Describe goods or services sold: Food and Beverage and goods and services associated with When are your services or products delivered? Within: <input checked="" type="checkbox"/> 1 Day <input type="checkbox"/> 1 Week <input type="checkbox"/> 30 Days <input type="checkbox"/> Other:					
Is merchant currently or has merchant previously been in any Card Brand chargeback or fraud monitoring program? (If Yes, please explain.)					
Current PCI DSS Compliance Status (Please explain)					

TAXPAYER IDENTIFICATION NO. <input checked="" type="checkbox"/> FEIN <input type="checkbox"/> SSN <input type="checkbox"/> GST		Number of Locations		Years in Business		Years Owned Business	
041189290		1		120		120	

OWNERS (Must be a Majority or Primary) / OFFICERS

NAME (1) James Simmons		Title General Manager		Percentage Ownership %		Email Address jim@cohassetgc.org	
Social Security # /Insurance #		Date of Birth		Driver's License #		Home Phone ()	
						Mobile Phone (617) 921-8263	
Home Address		<input type="checkbox"/> Own <input type="checkbox"/> Rent		City		State/Province	
						Zip/Postal Code	
						Years There	
Previous Employment (if less than 1 year in current employment)		Title		How Long?		Type of Business	
NAME (2)		Title		Percentage Ownership %		Email Address	
Social Security # /Insurance #		Date of Birth		Driver's License #		Home Phone ()	
						Mobile Phone ()	
Home Address		<input type="checkbox"/> Own <input type="checkbox"/> Rent		City		State/Province	
						Zip/Postal Code	
						Years There	
Previous Employment (if less than 1 year in current employment)		Title		How Long?		Type of Business	

BANK INFORMATION (Primary Settlement Account)

Bank Name Hingham Institution of Savings		Contact Vikki Sindone		Phone NO. (781) 749-2200		Fax NO. ()	
Transit # (ABA Routing) 211370370		DDA # (Checking/Savings) 27174563					

SECOND BANK INFORMATION (If applicable)

Bank Name		Contact		Phone NO. ()		Fax NO. ()	
Transit # (ABA Routing)		DDA # (Checking/Savings)					

PREPARED BY FIELD SALES REP		Email		FIELD SALES ID	
Prepared by Inside Sales Rep (if applicable)				INSIDE SALES ID	
Range # 295970197881		Book Number 73		Corporate Field	
				Chain #	



MERCHANT EZ APPLICATION

Additional Location <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Partner Name (If Applicable) Plastiq-197	APP ID
MID		

CREDIT CARD SCHEDULE OF RATES AND FEES

Do you currently accept credit cards? ☐ No ☐ Yes (If Yes, you should submit 3 most recent months' statements) ☐ AutoDebit Only ☐ SPS-EFT ☐ Other

Name of Current Processor Reason Leaving

CREDIT CARD: Average Ticket Size \$ 1,000	Annual Volume \$ 4.5 Million	<input type="checkbox"/> Program Code:	<input type="checkbox"/> Promo Code:
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Explain Intended Use of Payment Services: **Member Bill Payment**

Merchant elects to accept the following cards at the rates/fees below (choose one): ☐ Debit Cards ☐ Other Cards ☒ All Cards ☐ Gross ☐ Net ☐ Gross Gross

STANDARD RATES													STANDARD FEES													MISCELLANEOUS SERVICES													
Visa* / MasterCard* / Discover**			Credit	Debit										Rush Boarding Fee						\$							INTERNET GATEWAY												
Qualified			0.15 %											Application Fee						\$							One-Time License Fee						\$						
Mid-Qualified			%											Set-Up Fee						\$							Monthly Gateway Fee						\$						
Non-Qualified			%											Monthly Maintenance						\$							Gateway Per Item Fee						\$						
Regulated				%										Monthly Minimum						\$							WIRELESS												
Interchange/Pass-Through			<input checked="" type="checkbox"/>										Annual Fee (To be charged annually)						\$							One-Time Set-Up Fee						\$							
By accepting Discover you are eligible to accept JCB* and Diners Club International* cards													Value Package						\$							Monthly Wireless Fee						\$							
Discover* (Retained):													Monthly PCI Program Fee						\$ 6.95							Wireless Per Item Fee						\$							
													Monthly PCI Non-Compliance Fee **						\$ 19.95							OTHER													
													** Only applies to non-compliant merchants																										
AUTHORIZATION													REPORTING OPTIONS BASED UPON ELECTION																										
Visa* / MasterCard* / Discover*			\$										Online Reporting / per account						\$							Address Verification Service Fee (AVS)						\$							
Non-Bank Card			\$										Paper Statement / per account						\$							EBT Transaction Per Item Fee						\$							
Batch Header			\$										E-Statement / per account						\$							Dispute Man Monthly Acc (per user)						\$							
Billback Surcharge			<input type="checkbox"/>										PER OCCURRENCE													Monthly Disp Mgr Fee (flat fee)						\$							
DEBIT													Bank Reject Fee						\$ 25.00							Rewards						<input type="checkbox"/> Yes <input type="checkbox"/> No							
PIN Debit Transaction Per Item			\$										Voice Call Authorization / ARU						\$							EBT:						<input type="checkbox"/> Cash Benefit <input type="checkbox"/> Food Stamps							
PIN Debit Interchange Fee			<input type="checkbox"/>										Touchtone Per Item						\$							FCS ID:													
PIN Debit Discount Rate			%										Terminal Re-Programming Fee						\$							Convenience Fee***						<input type="checkbox"/> Fixed \$ <input type="checkbox"/> Percentage %							
Regulated Signature Debit Auth Fee			\$										Call Tag Fee						\$							*** Network Fees may apply to certain Merchant's assessing a convenience fee.													
Regulated Signature Debit Sales Transaction Fee			\$										Chargebacks						\$ 20.00							Account Updater						<input type="checkbox"/> Visa (VAU) <input type="checkbox"/> MasterCard (ABU)							
Regulated Signature Debit Return Transaction Fee			\$										Retrievals						\$ 7.00							Registration Fee						\$							
													Bank Card Per Item						\$							Monthly Fee						\$							

Rates and fees are based on proposed volume of transactions listed in Merchant's application and above, and corresponding levels of Interchange applicable thereto, and are subject to adjustment by Bank or Card Associations based upon actual volume levels and qualifications for interchange. Early Termination Fee is calculated based on the greater of Two Hundred Fifty Dollars (\$250) or Bank's average monthly volume derived from processing Merchant's transactions (based on an average of the highest three (3) months of processing volume during the previous or current term of the Agreement, whichever is greater), multiplied by .003, multiplied by the number of full and partial months remaining in the term of the Agreement. Certain administrative charges may be assessed as specified in Sections 6 and 10 of this Agreement. If Merchant elects an option other than "All Cards" but later submits a transaction in another category, Bank will process the transaction pursuant to the terms of this Agreement and assess the appropriate fee. Gross billing is defined as fees charged on gross sales volume. Gross-Gross billing is defined as fees charged on gross sales volume and credit volume. Net billing is defined as fees charged on net sales volume. Rewards Discount Rate for sales and credits: An additional 0.20% over the credit Qualified, Mid-Qualified, Non-Qualified Discount Rates.

NETWORK AND OTHER FEES

VISA** Acquirer Processing FeeCurrently \$0.02 per authorization. International Fee (IAF)Currently 0.45% or 0.90% per settled transaction based on your merchant category code. ISA FeeCurrently 0.40% of Visa International Sales Volume. Cash Advance Fee (ISA)Currently 0.40% of Visa International Sales Volume. Misuse of Auth FeeCurrently \$0.045 per authorization. Zero Floor Limit FeeCurrently \$0.10 per Visa transaction without proper authorization. Assessment FeeCurrently 0.11% of sales volume. Transaction Integrity FeeCurrently \$0.10 per transaction. Network Fee CP (Card Present)Varies based on # of locations. Network Fee CNP (Card Not Present)Varies based on CNP volume. PULSE* Pulse Debit Network Annual FeeCurrently \$9.00 STAR* STAR Debit Network Annual FeeCurrently \$6.00	MASTERCARD** Network Access Usage FeeCurrently \$0.02 per transaction. Cross-Border FeeCurrently 0.40% of MasterCard International Sales Volume. Acquirers Program Support FeeCurrently 0.85% of MasterCard International Sales Volume. Assessment FeeCurrently 0.11% of sales volume (an additional fee will be added for transactions >=\$1,000. Currently 0.02%). Acct Status Inq SVC Intraregional\$0.025 per transaction. Acct Status Inq SVC Interregional\$0.03 per transaction. Processing Integrity Fee\$0.055 per authorization (that is not cleared or reversed). DISCOVER** Data Usage FeeCurrently \$0.02 per transaction. International Processing FeeCurrently 0.40% per settled international transaction. International Service FeeCurrently 0.55% per settled international transaction. Assessment FeeCurrently 0.105% of sales volume.
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*Pricing may increase due to any increases in association and other third party fees which will be passed through to you.

AMERICAN EXPRESS CARD* ACCEPTANCE

Choose Only One <input type="checkbox"/> New <input type="checkbox"/> Existing	Existing American Express* Merchant Number	Expected Annual Card Sales \$	Estimated Average Ticket \$
Choose Only One <input type="checkbox"/> Discount Rate % <input type="checkbox"/> Paper % <input type="checkbox"/> Monthly Flat Fee \$7.95 (\$0.00 - \$4,999 net annual volume only)	Franchise Name		
Choose Only One Transaction Fee <input type="checkbox"/> Retail + \$0.10 Transaction Fee + 0.30% Card Not Present Downgrade <input type="checkbox"/> Services, Wholesale & All Other + \$0.15 Transaction Fee		Choose only one <input type="checkbox"/> Monthly Gross Pay <input type="checkbox"/> Daily Gross Pay (+0.03% if \$100,000 or more)	Home Based <input type="checkbox"/> Yes <input type="checkbox"/> No
			Pay Frequency (in days) <input type="checkbox"/> 3 <input type="checkbox"/> 15 <input type="checkbox"/> 30

By signing the Merchant Acceptance, I, for myself and on behalf of Merchant, represent that I have read and am authorized to sign and submit this application on behalf of the Merchant above, and all information I have provided on the Moneris Solutions EZ Application (the "Application") is true, complete, and accurate. Merchant requests that American Express Card* acceptance be added to my Merchant Services Agreement. I authorize American Express Travel Related Services Company, Inc. ("American Express") to verify the information in this application and receive and exchange information about me personally, including by requesting reports from consumer reporting agencies. I authorize and direct American Express to inform me directly, or through the Merchant above, of reports about me that American Express has requested from consumer reporting agencies. Such information will include the name and address of the agency furnishing the report. I understand that upon American Express' approval of the Merchant indicated above to accept the American Express card, the terms and conditions for American Express Card acceptance ("Terms and Conditions") will be sent to such Merchant along with a welcome letter. By accepting the American Express Card for the purchase of goods and/or services, or otherwise indicating its intention to be bound, the Merchant agrees to be bound by the Terms and Conditions.



MERCHANT EZ APPLICATION

Additional Location ☐ Yes ☒ No
MID

Partner Name
(If Applicable) PlastiQ-197

APP ID

AUTODEBIT / CHECK CONVERSION ACCEPTANCE

- ☐ eSELECTplus
☐ POS Terminal
☐ T Tech

Explain Intended Use of AutoDebit Services:

Explain Intended Use of Check Conversion Services:

AutoDebit / CHECK SERVICES:

Average
Ticket Size \$

Monthly
Volume \$

Maximum
Ticket Size \$

Monthly
Transactions #

PERCENTAGE OF AUTODEBIT TRANSACTIONS

Face to Face: ☐ PPD ☐ CCD ☐ POP ☐ BOC %

Internet Order: ☐ WEB %

Mail Order: ☐ ARC %

Fax: ☐ PPD ☐ CCD %

TOTAL 100 %

Single %

Recurring %

TOTAL 100 %

Convenience Fee

☐ Fixed \$

☐ Percentage %

GATEWAY INTERFACE

☐ API Integration / Direct Host ☐ Virtual Terminal

☐ Batch Upload ☐ Hosted PayPage ☐ Other:

EQUIPMENT

☐ POS Terminal Type: Qty:

☐ Check Reader / Imager: Type: Qty:

STANDARD RATES AND FEES

	AutoDebit				Check Conversion				Paper Guarantee (No Conversion)
	<input type="checkbox"/> PPD	<input type="checkbox"/> CCD	<input type="checkbox"/> WEB	<input type="checkbox"/> ARC	<input type="checkbox"/> BOC	<input type="checkbox"/> POP	<input type="checkbox"/> POP w/ Guarantee	<input type="checkbox"/> POP-QSP	
Transaction Fee / Item									
Discount %									
Return Fee									
Reversal Fee									
Monthly Minimum									
Monthly Service / Statement Fee									
Batch Fee									

Additional persons with authorization to online reporting:

1. 2.

3. 4.

Merchant understands and agrees that it may be subject to termination fees assessed by Bank's third-party providers of check/ACH services. Termination fees charged by these providers currently range up to \$125 and are subject to change by these providers.

FOR AUTODEBIT (Complete Below)

Which written authorization procedures will Merchant be using? (MUST USE AND RETAIN ON FILE)

1. Signed written authorization from customer? ☐ Yes ☐ No

2. Will the Merchant be using the template provided by check processor? ☐ Yes ☐ No If "No" please include the written authorization form Merchant will be using

How often will Merchant submit AutoDebit transactions?

☐ Daily ☐ Weekly ☐ Other, Please Explain:

ALTERNATE BANK ACCOUNT FOR BILLING (If Different Than Primary Settlement Account)

Bank Name

Contact

Phone NO.
()

Fax NO.
()

Transit #
(ABA Routing)

DDA #
(Checking/Savings)

BMO Harris Bank N.A.

Moneris is a registered agent
of BMO Harris Bank N.A.

AutoDebit Check

MSFRI-OCG-APP-082014



MERCHANT EZ APPLICATION

Additional Location <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Partner Name (If Applicable) Plastiq-197	APP ID
MID		

VENDOR (FRONT END PLATFORM)

☐ Moneris Host (Phoenix) ☐ TSYS ☐ FDMS-Nashville ☐ Other

Time Zone _____ Auto close: ☐ No ☒ Yes Time **11:00** ☐ a.m. ☒ p.m.

EQUIPMENT

TERMINALS*: Type _____ ☐ DSL/IP ☐ Dial-Up
☐ Wireless

☐ OWN Serial # _____
Sim Card # _____
☐ RENTAL Fee \$ _____ x Quantity _____ Total: \$ **0**
☐ PURCHASE Price \$ _____ x Quantity _____ Total: \$ **0**

*If additional terminal type use "Other" section

PRINTERS:

☐ OWN Type: _____
☐ RENTAL Fee \$ _____ x Quantity _____ Total: \$ **0**
☐ PURCHASE Price \$ _____ x Quantity _____ Total: \$ **0**

PIN PADS: Type _____ ☐ USB ☐ Serial

☐ Encryption Fee \$ _____ ☐ Swap Fee \$ _____

☐ OWN Serial # _____
☐ RENTAL Fee \$ _____ x Quantity _____ Total: \$ **0**
☐ PURCHASE Price \$ _____ x Quantity _____ Total: \$ **0**

OTHER:

☐ OWN Serial # _____
☐ RENTAL Fee \$ _____ x Quantity _____ Total: \$ **0**
☐ PURCHASE Price \$ _____ x Quantity _____ Total: \$ **0**

A Restocking Service Fee (as specified in the Equipment packaging) will apply to permitted returns of Purchased Equipment within the first 30 days.

Imprinters (Cost \$26.00 each): Purchase Quantity _____ @ **\$26.00** ea. = Total: \$ **0** Plates: Quantity _____ Size: ☐ 1-1/8" x 2-5/8" (Std size) ☐ 1-1/16" x 1-3/4" (AMEX)

Terminal Application: ☐ Retail/MOTO ☐ Retail w/tips ☐ Restaurants w/tips ☐ Restaurants w/o tips ☐ Hotel/Lodging ☐ QSR

Terminal Feature: ☐ Commercial Card Level 2 ☐ Multi-merchant ☐ Main Account ☐ Main Account #: _____

Optional Processing Features:

For outside line, dial: (_____) ☐ Receipt Message Header:

Training: ☐ Agent ☐ Phone (Default) ☐ Receipt Message Footer:

PC SOLUTIONS

SOFTWARE: _____ SOFTWARE VERSION: _____ ☐ Upgrade ☐ Own ☐ Purchase: Software Purchase Price \$ _____

☐ Other PA DSS Compliant Software: _____ ☐ Other PA DSS Compliant Software Version: _____

Communication Type: ☐ Dial ☐ IP User License: ☐ Single ☐ Multi Serial No. _____

INTERNET SOLUTIONS

<input checked="" type="checkbox"/> eSELECTplus	ENVIRONMENT <input type="checkbox"/> Consumer Present <input type="checkbox"/> eCommerce / MOTO	FEATURED FUNCTIONALITIES (Check one or more) <input type="checkbox"/> Encrypted MAG Swipe <input type="checkbox"/> MAG Swipe Credit <input type="checkbox"/> Recurring Payment <input type="checkbox"/> Convenience Fee <input type="checkbox"/> Dynamic Descriptor <input checked="" type="checkbox"/> Address Verification Service (AVS) <input checked="" type="checkbox"/> Card Validation Value (CVV) <input type="checkbox"/> SECURE CODE (MC) <input type="checkbox"/> VBv (VISA) Level 2 / 3: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express Account Updater <input type="checkbox"/> VISA (VAU) <input type="checkbox"/> MasterCard (ABU) <input type="checkbox"/> VAULT Monthly Fee/Record Monthly Fee Per Match Fee \$ _____ \$ _____ \$ _____ \$ _____
	GATEWAY INTERFACE <input checked="" type="checkbox"/> API Integration / Direct Host <input type="checkbox"/> Batch Upload (Check one or more) <input type="checkbox"/> Virtual Terminal <input type="checkbox"/> Hosted Pay Page <input type="checkbox"/> Mobile App <input type="checkbox"/> Integrated Mobile API	
	PAYMENT TYPE <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Check Conversion <input type="checkbox"/> AutoDebit <input type="checkbox"/> Pinless Debit <input type="checkbox"/> Pin Debit	

SYSTEM: ☐ PC ☐ MAC
GATEWAY: ☐ USA ePay ☐ USA ePay w/MCP ☐ USA ePay Swipe ☐ Authorize.net
☐ Own OR ☐ PURCHASE: Gateway Purchase Price \$ _____ ☐ Other Gateway (name): _____ ☐ MCP

SYSTEM INTEGRATOR (Send Gateway/PC/Terminal Set-Up Information to)

Technical Contact or System Integrator Name: Plastiq - Tiffany Chang	Phone NO. { 650 } 867-5389	Email Address mids@plastiq.com
If contact is different than System Integrator fax to: _____	Fax NO. { _____ }	Attention _____

MID / TID EMAIL NOTIFICATION

Email Address	Email Address	Email Address	Email Address
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SHIPPING INSTRUCTIONS

SHIP TO: ☐ DBA Address ☐ Legal Address ☐ Other Address (provide below) VIA: ☐ 2 day ☐ Standard Overnight (PM) ☐ Priority Overnight (AM) ☐ Overnight Saturday Rush Shipping Fee \$ _____
Name _____ Street (No P.O. Box) _____ City _____ State/Province _____ Zip/Postal Code _____

MERCHANT SITE SURVEY REPORT (To Be Completed by Sales Representative)

Is the merchant's DBA name displayed at the facility? (Exterior signage?) ☐ Yes ☐ No (If No, Explain): _____

Does the address match that of the merchant's application? ☐ Yes ☐ No (If No, Explain): _____

Does the merchant have appropriate/sufficient equipment/inventory consistent with the type of business and projected sales volume and average ticket?
☐ Yes ☐ No (If No, Explain): _____

Does the merchant: <input type="checkbox"/> Own <input type="checkbox"/> Lease <input type="checkbox"/> Other (Explain): _____	Do they have a website? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is it currently functioning? <input type="checkbox"/> Yes <input type="checkbox"/> No
Further comments by the inspector: _____	What is the URL: _____	

I hereby certify the above information and recommend this Merchant Application based on the site inspection completed on this date: _____ / _____ / _____

Premises inspection completed by: Sales Representative Signature _____ Print Name _____ Title _____

X



MERCHANT EZ APPLICATION

Pre-Note

MCC

Additional Location ☐ Yes ☒ No
MIDPartner Name
(If Applicable) Plastiq-197

APP ID

CARD NOT PRESENT INFORMATION (If Applicable)

For merchants who process MORE THAN 20% of their bankcard transactions, or volume, without physically swiping the credit card, we ask that you complete the following information in its entirety.

Provide a full description of the product or service you provide to the cardholder:

We are a golf club therefore we charge our members for dues and privileges, food and beverage sales and any purchases in the golf or tennis club.

How will you receive cardholder data? ☐ Phone ☐ Fax ☒ Internet ☐ Mail

For Internet orders, please provide us with your active URL: www.plastiq.com

(If site is not active, please provide a test site with a user name and password if one is needed. Please also note that for our Internet merchants, we ask that your website meet specific security and disclosure criteria.)

When do you typically charge the cardholder? ☐ BEFORE or ☒ AFTER the product/service is provided to the cardholder

What is your general breakdown of billing?

0 % At time of purchase 44 % Monthly 0 % Quarterly 56 % Annually % Other, explain:

What is the average amount of time (in days) that it will take for the cardholder to receive the product/service? 1 (days)

What is your target geographic area? 100 % United States % Canada % Other:

For your product/service, do you outsource any of the following? ☐ Customer Service ☐ Product Shipment ☐ Handling of Returns ☐ Cardholder Billing ☐ Fulfillment House

If Yes to any of the above, please list the name(s), address(es) and phone number(s) of those fulfillment organizations:

1.

2.

For merchants who receive cardholder data from the Internet, please advise if any part of your website is outsourced to a third party? Common examples include:

☐ Shopping Cart ☐ Hosting Solutions ☐ Gateway ☐ Cardholder Data Storage ☐ Other, explain:

In some cases, we may require certificates from those third parties confirming their compliance in protecting cardholder data.

REFUND POLICY: ☐ No Refunds ☐ Refund Within 30 Days ☐ Damaged/Defective Merchandise Only ☐ Restocking Fee Charged ☐ Store Credit Only
☐ Return Authorization Required (RM/RMA) ☒ Other We issue credits on account for any refunds/billing errors

Should Merchant alter or change any aspect of the business from that described herein, or if any information changes, without prior notice to and approval by Bank, then Merchant will be subject to termination. Also, Merchant agrees to obtain, abide by, and fully comply with protecting cardholder data as described at www.pcisecuritystandards.org.

PERSONAL GUARANTY

Name of Guarantor:

Merchant Name:

To induce BMO Harris Bank N.A., Moneris Solutions, Inc. (collectively "Bank"), and Sage Payment Solutions EFT and all other Moneris Solution third party providers to enter into the Merchant Services Agreement and/or any agreements for SPS-EFT services (the "SPS-EFT Agreements"), the Guarantor(s) indicated below jointly and severally, unconditionally and irrevocably, guarantee the continuing full and faithful performance and payment by Merchant of each of its duties and obligations to Bank and SPS-EFT (collectively, the "Guaranty Recipients") pursuant to the Merchant Services Agreement and the SPS-EFT Agreements (collectively, the "Agreements"), as they now exist or as amended from time to time, with or without notice. This guaranty is a guaranty of payment, and not of collection, and a debt of Guarantor for his or her own account. Accordingly, none of the Guaranty Recipients shall be required before enforcing this guaranty against Guarantor: (1) to pursue any right or remedy any of the Guaranty Recipients may have against Merchant or any other Guarantor; (2) to make any claim in a liquidation or bankruptcy of Merchant or any other Guarantor of these obligations; or (3) to make demand of the Merchant or any other Guarantor of these obligations or to seek to enforce or realize upon any collateral security held by any of the Guaranty Recipients which may secure these obligations. The guaranty shall not be discharged or otherwise affected by any waiver, indulgence, compromise, settlement, extension of credit, or variation of terms of the Agreements. I/We waive any notice of acceptance of this guaranty, notice of non-payment or non-performance of any provision of the Agreements by Merchant, and all other notices or demands regarding the Agreements. I/We agree to promptly provide to the Guaranty Recipients any information requested from time to time concerning my/our financial condition, business history, business relationships and employment information. This guaranty will not be discharged or affected by the death of the Guarantors, will bind all heirs, administrators, representatives and assigns and may be enforced by or for the benefit of any successor of the Guaranty Recipients. Guarantor(s) understand that the inducement to the Guaranty Recipients to enter into the Agreements is consideration for the guaranty, and that this guaranty remains in full force and effect even if the Guarantor(s) receive no additional benefit from the guaranty.

Signature of Guarantor, as an individual

X Sign Here

Printed Name and Home Address of Guarantor

MERCHANT AUTHORIZATION AND ACCEPTANCE

The owner, officer, partner, or member signing this Merchant Application (the "Signing Party") represents that the Signing Party is authorized to sign the Merchant Application (the "Application") and enter into the Merchant Services Agreement (the "Agreement"). The Signing Party also represents and warrants that the Application and all information and documentation submitted in connection with the Agreement is true, complete and correct. All requested information must be provided for the Application to be processed. If the information provided on the Application or elsewhere cannot be verified, then the Application may be denied. Merchant and its owner have authorized, and shall continue to authorize Bank, Moneris, their third party providers and their representatives and affiliates to obtain and verify any financial and credit information regarding Merchant and its owner, and to share such information amongst Bank, Moneris, their third party providers and their affiliates and their representatives.

Notice: To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an Agreement. This means that when you enter into an Agreement we will ask for name, address, date of birth and other information that will allow us to identify you or the entity on whose behalf you are signing.

MERCHANT HAS READ AND UNDERSTANDS ALL OF THE TERMS OF THE AGREEMENT SET FORTH ON THE MONERIS AGREEMENT WEBSITE (<https://www.monerisusa.com/terms-and-conditions>) AND ACCEPTS AND AGREES WITH ALL SUCH TERMS. IF BANK AND/OR MONERIS AGREE TO PROVIDE SERVICES TO MERCHANT, SUBMISSION OF ANY TRANSACTIONS OR ITEMS TO BANK, MONERIS OR ITS THIRD PARTY PROVIDERS CONSTITUTES CONSENT TO THE AGREEMENT TERMS AND CONDITIONS AND THE TERMS AND CONDITIONS RELATED TO ANY OTHER SERVICES MERCHANT HAS ELECTED TO RECEIVE.

SIGNATURE FOR MERCHANT:

By: X Sign Here

Telephone: (781) 383-9890

Fax: (781) 383-2904

(Authorized Signature)
NAME (Please Print) James Simmons

Title General Manager

Date 1/13/2015

FOR OFFICE USE ONLY (Merchant - Do Not Sign Below)

BMO Harris Bank N.A.

Moneris Solutions, Inc.

By: Authorized Representative

By: Authorized Representative

Cohasset Golf Club

Cohasset Golf Club

Detach Before Depositing



Cohasset Golf Club

P.O. Box 247

Cohasset, Massachusetts 02025-0247

Hingham Institution for Savings
MASSACHUSETTS

53-7037/2113

No. **010799**

PAY
EXACTLY

PAY TO THE
ORDER OF:

DATE

CHECK NO.

AMOUNT

\$

TWO SIGNATURES REQUIRED IF OVER \$10,000.00

⑈010799⑈ ⑆211370370⑆ 27 174 563⑈

COHASSET GOLF CLUB
Statement of Financial Position

Assets

	December 31	
	2013	2012
Current assets		
Cash and cash equivalents	\$ 3,046,593	\$ 275,756
Investments, at fair value	-	2,301,825
Accounts receivable, net	7,382	32,345
Deferred dues receivable	260,720	249,785
Current portion of entrance fees receivable	56,414	208,922
Current portion of certificates of membership receivable	84,028	95,764
Inventories, at cost	15,734	19,884
Prepaid expenses	52,241	41,288
Total current assets	<u>3,523,112</u>	<u>3,225,569</u>
Entrance fees receivable, net of current portion	<u>493,907</u>	<u>119,218</u>
Certificates of membership receivable, net of current portion	<u>84,600</u>	<u>126,760</u>
Property and equipment, at cost	17,383,539	17,069,341
Less accumulated depreciation	<u>9,680,048</u>	<u>9,115,140</u>
Net property and equipment	<u>7,703,491</u>	<u>7,954,201</u>
Deferred mortgage costs	<u>38,844</u>	<u>40,084</u>
Total assets	<u>\$11,843,954</u>	<u>\$11,465,832</u>

Liabilities, Certificates of Membership and Net Assets

Current liabilities		
Accounts payable	\$ 181,392	\$ 191,738
Taxes payable and accrued	46,431	34,641
Deposits	30,500	32,200
Deferred charges	260,720	249,785
Current portion of lease payable	47,145	43,767
Current portion of long-term debt	<u>25,625</u>	<u>24,288</u>
Total current liabilities	591,813	576,419
Long-term debt, net of current portion	2,066,673	2,092,398
Lease payable, net of current portion	<u>-</u>	<u>47,145</u>
Total liabilities	<u>2,658,486</u>	<u>2,715,962</u>
Net assets		
Certificates of membership	5,528,744	5,700,056
Unrestricted net assets	<u>3,656,724</u>	<u>3,049,814</u>
Total certificates of membership and net assets	<u>9,185,468</u>	<u>8,749,870</u>
Total liabilities, certificates of membership and net assets	<u>\$11,843,954</u>	<u>\$11,465,832</u>

See notes to financial statements.

COHASSET GOLF CLUB

Statement of Activities

	Year Ended December 31	
	2013	2012
Revenue		
Membership dues and privileges	\$ 2,629,918	\$ 2,524,011
Golf operations	314,130	331,530
Golf car rentals	128,955	131,726
Food and beverage	1,126,147	1,116,000
Unused minimum	106,263	104,282
House charges	190,326	189,777
Clubhouse and locker rentals	31,836	32,767
Tennis	13,825	13,045
Interest	12,522	965
Late fees and members' interest	58,034	25,109
Other	62,648	46,076
Total revenue	<u>4,674,604</u>	<u>4,515,288</u>
Costs and expenses		
Cost of sales	<u>425,123</u>	<u>426,514</u>
Payroll and related expenses		
Salaries and wages	2,030,188	1,934,200
Payroll taxes and employee benefits	392,636	405,832
Employees' meals	<u>20,758</u>	<u>19,266</u>
Total payroll and related expenses	<u>2,443,582</u>	<u>2,359,298</u>
Other expenses		
Golf course maintenance	440,019	398,412
Golf operations	151,645	158,062
Food and beverage	103,179	115,901
Clubhouse and locker rooms	361,526	359,100
Tennis	16,428	12,660
Administrative and general	<u>207,631</u>	<u>179,917</u>
Total other expenses	<u>1,280,428</u>	<u>1,224,052</u>
Total costs and expenses	<u>4,149,133</u>	<u>4,009,864</u>
Excess of revenue over expenses before fixed charges	<u>525,471</u>	<u>505,424</u>
Fixed charges		
Real estate taxes	104,438	99,586
Insurance	70,362	66,605
Interest	<u>115,362</u>	<u>132,452</u>
Total fixed charges	<u>290,162</u>	<u>298,643</u>
Excess of revenue over expenses before depreciation and amortization	235,309	206,781
Depreciation and amortization	<u>(627,048)</u>	<u>(628,292)</u>
(Deficiency) of revenue to cover expenses before other addition (deduction)	(391,739)	(421,511)
Other addition (deduction)		
Entrance fees	1,005,449	611,253
Insurance proceeds – net	<u>(6,800)</u>	<u>(864)</u>
Increase in unrestricted net assets	606,910	188,878
Unrestricted net assets, beginning of year	<u>3,049,814</u>	<u>2,860,936</u>
Unrestricted net assets, end of year	<u>\$ 3,656,724</u>	<u>\$ 3,049,814</u>

See notes to financial statements.

COHASSET GOLF CLUB

Statement of Cash Flows

	Year Ended December 31	
	2013	2012
Cash flows from operating activities		
Increase in unrestricted net assets	\$ 606,910	\$ 188,878
Adjustments to reconcile increase in unrestricted net assets to net cash provided by operating activities		
Depreciation and amortization	627,048	628,292
(Increase) decrease in current assets		
Accounts receivable	24,963	(8,401)
Inventories	4,150	3,799
Prepaid expenses	(10,953)	(297)
(Increase) in entrance fees receivable	(222,181)	(109,171)
Decrease in certificates of membership receivable	53,896	77,119
Increase (decrease) in current liabilities		
Accounts payable	(10,346)	99,955
Taxes payable and accrued	11,790	(24,734)
Deposits	(1,700)	(20,100)
Net cash provided by operating activities	<u>1,083,577</u>	<u>835,340</u>
Cash flows (used in) investing activities		
Expenditures for property and equipment,	<u>(375,098)</u>	<u>(299,028)</u>
Cash flows from financing activities		
Proceeds from sale of investments	2,301,825	-
Purchase of investments	-	(400,966)
Payments on long-term debt	(24,388)	(22,602)
Payments on capital lease obligation	(43,767)	(40,630)
(Decrease) in certificates of membership	<u>(171,312)</u>	<u>(100,196)</u>
Net cash provided by (used in) financing activities	<u>2,062,358</u>	<u>(564,394)</u>
Net increase (decrease) in cash and cash equivalents	2,770,837	(28,082)
Cash and cash equivalents, beginning of year	<u>275,756</u>	<u>303,838</u>
Cash and cash equivalents, end of year	<u>\$3,046,593</u>	<u>\$ 275,756</u>
Supplemental disclosure of cash flows information:		
Cash paid for interest	<u>\$ 115,362</u>	<u>\$ 132,452</u>

See notes to financial statements.