

6101 Esquire Frontline

4550 Kennedy Drive Suite 1

East Moline, IL 61244

June 15, 2016

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Dear Merchant:

The cardholder's bank has requested a copy of the transaction referenced on the form below. We do not know the cardholder's name, or the reason for the request.

Please mail all LEGIBLE copies of the item(s) listed below. The following information MUST be included on the sales draft or contract/invoices.

- Cardholder Name, Account Number and Expiration Date
- Signed copies of the sales draft, contracts or delivery tracking slip if applicable
- Transaction Date and Transaction Amount
- Merchant name and location
- Description of the merchandise or services
- Copies of the contract, invoice, guest folio, email, order form, rental agreement, etc
- Itemized charges (if available)

Please respond to this letter no later than 6/30/2016. Failure to respond within the required time may result in a chargeback to your account, without recourse.

Thank you for your cooperation.

| | | | |
|-------------------|-----------------------------|--------------------|------------------|
| Cardholder Number | Acquirer's Reference Number | Transaction Amount | Transaction Date |
| xxxxxxxxxxx | | #Error | // |

Detach Bottom Portion And Return

Retrieval Request Fulfillment Form

| | | | |
|-------------------|-----------------------------|--------------------|------------------|
| Cardholder Number | Acquirer's Reference Number | Transaction Amount | Transaction Date |
| xxxxxxxxxxx | | #Error | // |

Type Of
Copy

Reason
Code

Request
Date

MCC

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