



1029 Mumma Road, P. O. Box 8863, Camp Hill, PA 17001-8863

717-731-0660 • 800-922-8079 • Fax: 717-731-0524

Affiliation ID _____

Lead Tracking # _____

Agent ID # _____

PFMA ID # _____

AGENCY APPLICATION

Money Orders Bill Payments Prepaid Cellular/Long Distance

Date: _____

Corporate Business Name: _____

D/B/A Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

County: _____ E-Mail Address: _____

Phone Number: _____ Fax Number: _____

Type of Business: C-Store Grocery Store Check Casher Other _____

Legal Structure: Corporation Partnership Proprietorship L.L.C.

List All Owners/Officers Owning 10% Or More Of Outstanding Stock (Use additional paper if necessary):

1. Principal Name: _____ Title: _____ % Stock Owned _____

SS#: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Cell Phone: _____

E-Mail Address: _____ Residence: Own Rent

2. Principal Name: _____ Title: _____ % Stock Owned _____

SS#: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Cell Phone: _____

E-Mail Address: _____ Residence: Own Rent

Contact Person For Weekly Money Order Report(s): _____

Date Present Ownership Started: _____

Building: Owned Leased Lessor Name: _____ Phone: _____

Federal Tax #: _____ State Sales Tax ID #: _____

Trade References: List Three (3) Current Suppliers That Extend You Credit Terms. (NO COD'S)

	<u>Name</u>	<u>City/State</u>	<u>Account #</u>	<u>Phone #</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

Bank References:

1. Name: _____ City: _____ State: _____

Phone: _____ Business Account #: _____ Loan #: _____

2. Name: _____ City: _____ State: _____

Phone: _____ Business Account #: _____ Loan #: _____



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DO YOU HAVE:	YES*	NO	DO YOU CURRENTLY OFFER:	YES	NO
1. Criminal Suits in Process or Conviction(s)?	<input type="checkbox"/>	<input type="checkbox"/>	1. State Lottery?	<input type="checkbox"/>	<input type="checkbox"/>
2. Civil Suits in Process?	<input type="checkbox"/>	<input type="checkbox"/>	2. Money Orders?	<input type="checkbox"/>	<input type="checkbox"/>
3. Bankruptcy Record?	<input type="checkbox"/>	<input type="checkbox"/>	3. Gift Certificates?	<input type="checkbox"/>	<input type="checkbox"/>
4. Judgement(s)?	<input type="checkbox"/>	<input type="checkbox"/>	4. Prepaid Products?	<input type="checkbox"/>	<input type="checkbox"/>
5. Income from other sources?	<input type="checkbox"/>	<input type="checkbox"/>	5. Bill Payments?	<input type="checkbox"/>	<input type="checkbox"/>
6. FAX Machine with a dedicated line?	<input type="checkbox"/>	<input type="checkbox"/>	6. Wire Transfer?	<input type="checkbox"/>	<input type="checkbox"/>
7. Computer?	<input type="checkbox"/>	<input type="checkbox"/>	7. Cash Checks?	<input type="checkbox"/>	<input type="checkbox"/>
			8. Other Services/Specify		

*PLEASE GIVE DETAILS: _____

HAVE YOU EVER BEEN A MONEY ORDER AGENT FOR ANOTHER COMPANY?
 NO YES (If YES, answer the following):
 Name of Previous Money Order Company?: _____
 Account Number: _____ Date: From _____ To _____
 If you are changing companies, please explain why: _____
 Remarks: _____

MEMO Application Notice: Privacy Policy: MEMO does not give any nonpublic personal information about MEMO Agent or Applicants to any company, person, or individual except as required by law and as described herein. The Applicant(s) expressly authorize MEMO and any business or consumer reporting agency employed by MEMO to receive and investigate, before and or after becoming an Agent, the above information and any other information obtained from the Applicant(s) or from any other persons as to the Applicant(s) conduct and qualifications while serving as an Agent of or obligated to MEMO as a money order Agent, all without causing any liability whatsoever to arise therefrom. MEMO discloses agent information (including account numbers and other nonpublic personal information) to its service providers to the extent necessary to complete the business transactions of the products and services MEMO offers to agents and consumers. MEMO provides Agent Identifying Information to those businesses which MEMO employs or has an agreement to jointly market goods or services. MEMO will not disclose Agent Identifying Information to a nonaffiliated third party that does not agree by contract to protect and not disclose all nonpublic personal information to other nonaffiliated third parties. Agent Identification Information consists of: Business Name; Business Address; Business Telephone Number; Owner/Controlling Officer's Name. Agents or Applicants may choose not to have their information provided to anyone by MEMO, except service providers, as required by law, and pursuant to an investigation performed by MEMO described above, by marking the box below.
 Please do not provide my information to anyone other than service providers, as required by law, and pursuant to an investigation performed by MEMO.

I certify that the above information is correct and understand that any MEMO Agency offered to me or my company (partnership, corporation or otherwise) be Merchant Express Money Order Company, Inc. and Subsidiaries "MEMO" will be conditioned thereon.
 I or we hereby authorize "MEMO" and any business or consumer reporting agency employed by "MEMO" to receive and investigate the above information and any other information obtained from me or us from any other person relating in any way to my or our eligibility for such agency, to make inquiries of all persons and of others having knowledge of me or us, and to answer inquiries from other persons as to my or our conduct and qualifications while serving us or obligated to "MEMO" as a money order agent, all without causing liability whatsoever to arise therefrom.
 This application must be signed by the sole proprietor, a general manager or by an authorized corporate officer. In any event, the person signing this application certifies he or she has the authority to enter into a binding contracts on behalf of the application.

Applicant Name: _____ **Title:** _____
Authorized Signature: _____ **Date:** _____

*******PLEASE ATTACH PERSONAL AND BUSINESS FINANCIAL STATEMENTS*******

Note: All personal and business financial statements are treated as highly confidential and shall be used to assist with the credit approval process. They will remain as part of an agents permanent file.
 ADDITIONAL INFORMATION: _____

FOR INTERNAL USE ONLY
 Approved Denied **By:** _____ **Date:** _____
 Notes/Comments: _____
 Estimated Weekly Money Order Items Sold: _____ Quoted Fee _____ Draft Schedule: 2X Weekly
Equipment
 Electra VeriFone **Type:** _____ **Credit Limits:** _____
Submitted By: _____ **MSR:** _____ **Date:** _____



BANK AUTHORIZATION FORM

BANK NAME: _____

BANK ADDRESS: _____

OWNER'S AUTHORIZATION: _____ Re: STORE NAME: _____

X _____ OWNER'S NAME: _____

We are currently reviewing a credit application for appointment as a money order agent, with the above business, which has given your bank as a reference. We would appreciate your completing the information below. Hence, the authorized signature verifies approval to release requested account information on a continuous basis. Please be assured all information will be held in strict confidence.

Please complete and sign the above only.

Checking & Savings Accounts

Account #	(1) _____	(2) _____
Opening Date of Account	_____	_____
Average Balance	\$ _____	\$ _____
Current Balance	\$ _____	\$ _____
# of NSF's	_____	_____
Remarks:	_____	

BORROWING _____ (PLEASE FILL IN BELOW)

NON-BORROWING _____

Loans

Account #	(1) _____	(2) _____
Date Opened	_____	_____
High Credit	\$ _____	\$ _____
Secured By	_____	_____
If Unsecured, Guarantor	_____	_____
Balance Outstanding	\$ _____	\$ _____
Remarks:	_____	

Your prompt reply is greatly appreciated. We have provided a postage paid envelope, if applicable.

Bank Employee Signature _____
 Title _____
 Date _____
 Phone # _____

Sincerely,

Credit Department

1029 Mumma Road -- P.O. Box 8863 -- Camp Hill, PA 17001-8863 -- (800) 922-8079 -- (fax) 717-214-5989