## ATM Operator Agreement and/or ATM Source of Funds Provider

			Declaration A	Agreement	
Select One:	0	Applicant is an Individual or a Sole Proprietor (complete Section C)			
		Applicant is a Company (complete Section D using information from the Articles of Incorporation)			
Then check a	appro	priate applicant role	e(s):		
_		ator or	-(-)		
ATM Source of Funds Provider or					
~		Operator and ATM S		rovider	
PATRIOT ACT DISCI laundering activitie When you become	LOSURE: s, Federa a custor	: IMPORTANT INFORMATION Al al law requires all financial insti	BOUT PROCEDURES FOR BECK tutions to obtain, verify, and address, date of birth, and of	OMING A CUSTOMER – To help record information that identi ther information that will allow	o the government fight the funding of terrorism and moner fies each individual or entity who becomes a customer. v us and our sponsor bank, Metabank, National Association
		ployment Location [Requi	res completion]	2 Physical Street Address	of Location
Name of Location (Doing Business As)				2. Physical Street Address of Location	
3. City, State, Zip of Location				4. Location Phone Number	
5. Business Tax ID Number of Merchant				6.Type of Business (Sole Proprietor, Partnership, LLC, Corporation, Financial Institution)	
7. Merchandise/Services Sold where terminal is deployed				8. Financial Institution Number (FI#, FDIC, NCUA, ASI)	
Section B Deployed Terminal Information [Requires completion] 9. Terminal Identification Number				10. Processor of deployed terminal	
Section C Applicant is an Individual or a Sole Proprietor  11. Applicant First Name				12. Applicant Last Name	
13. Applicant (Home) Physical Street Address				14. Applicant (Home) City, State, Zip	
15. Applicant Socia	al Secur	ity Number	16. Applicant Date of Birth	(mm/dd/yyyy)	17. Applicant Home or Mobile Phone Number
		a Company (Partnership, LL as stated on Articles of Incor			stated on Articles of Incorporation
To. Company Legal Name as stated of Antoles of Incorporation				To: Company Address as stated on Antiones of Mostiporation	
20. Company City, State, Zip as stated on Articles of Incorporation				21. Company Federal Employer Identification Number (FEIN)	
22. The undersigned A contained in this Applicant unparticipate - Applicant unparticipate - The Applica Bank The Applica Happlica Happlica this Applicant a - Applicant unparticipate - Applicant a - Applicant is	Applicant action for noderstandin. (NOT) and is appart acknown and agree attion. uthorizes and is a to grees to have a complete the action and agrees to an action and agrees the action action and action action and action action action action action action action action for action action for action action for action action for ac	Sponsorship, and any other doct ds that MetaBank, National Association and Asociation and Association and Association and Association and Asso	Source of Funds Provider") pro umentation supplied thereto, is iation ("Bank") sponsors the ATM any other point-of-sale (POS) tri ith Bank, as an ATM Operator a ing of terrorism and money laund stain Consumer and (if applicable stigate information or data obtain ed authorization for such Compa cluding financial data, as may be e and accurate disclosure of the y this Application in its reasonable laws and regulations as well as itions, which Bylaws and Operatin attionship in Bank's sole discretic miless the Bank, the processor, the and against any and all claims, lead and Operating Regulations and/of at a sponsored Terminal shall be taffiliated with a cannabis relate	ovides consent to the undersigned true and correct.  If Terminal and financial transactions are NOT supported by and/or ATM Source of Funds Providering activities, Bank is required to be Business Credit Reports and to ed from this application.  In reasonably requested by Bank. In reasonably requested by Bank. In the and scope of the investigated discretion.  In banking, regulatory, and networking Regulations may be amended on or in the event that the Applications in the Networks you participate in (incosses, or damages arising out of the governing regulations are fair and reasonable and in according to the second of the control	ed ISO ("ISO") for all the following and affirms that all informations on the ATM Terminal that the Applicant will financially this agreement) ider sponsored by the Bank. o verify the identity of each person who opens an account with undertake a criminal Background Investigation in connection wit tion requested hereunder.  rules, including but not limited to the Plus Systems, Inc.,
Signature of ATM Operator/ATM Source of Funds Provider					
Signature				Signature	
Name				Name	

Title/Date

Title/Date