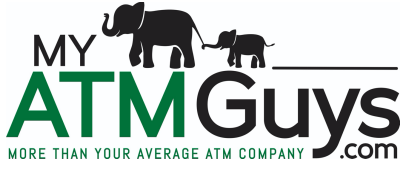


My ATM Guys, Inc.
www.MyATMGuys.com
Office: 877-876-9286
Fax: 845-419-2035

ATM Lease Agreement

This agreement made this _____ day of _____, 20____, by and between **MY ATM GUYS, INC.** (hereinafter referred to as “Lessor”) and, _____ (hereinafter referred to as “Lessee”). In consideration of the mutual promises contained within, the parties hereto agree as follows:

1. **EQUIPMENT:** Lessor hereby leases to Lessee the following ATM Machine(s):
 - a. Make _____
Model _____
Serial # _____
2. **LEASE TERM:** Month to Month Lease, no contract binding in length. Lessor requires a ten-day notice if Lessee wishes to terminate lease.
3. **LEASE PAYMENTS:** Lessee agrees to pay Lessor as rent for the Equipment in the amount of \$ _____ +tax (“Rent”) each month in advance via Credit/Debit card on the tenth day of each month.
4. **CHANGE OF CREDIT/DEBIT CARD:** If payment fails to complete because of a canceled or expired card, the Lessee will need to update the card information within ten days of the due date. There will be no late fee if it is updated within ten days, after that there will be an additional fee of \$10 per week without payment.
5. **DELIVERY/SETUP:** Lessor will deliver, install, and train the Lessee how to use the ATM. Lessor requires an internet line (CAT5/CAT6) must be ran directly from the locations router to the place the ATM will be installed (ATM will not work on wifi).
6. **MONITORING:** Lessor will supply Lessee with online access to see the cash balance of the ATM, statements, and transactions. Lessor will also offer automated text notifications if the ATM drops below a balance of \$500.
7. **MAINTENANCE:** Lessee will be sure to keep the ATM clean and in good working order. Lessor will maintain software updates and other hardware updates as they become required by the industry.
8. **SUPPLIES:** Lessor will supply the Lessee with free ATM receipt paper for the life of the lease. Lessor will also supply the Lessee with a lighted “ATM INSIDE” sign and “ATM INSIDE” stickers for the door/gas pumps.



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9. **OWNERSHIP:** The Equipment is and shall remain the exclusive property of Lessor. If Lessee wishes to purchase the Equipment, 50% of the Lease Payments will be applied to the current market price of the equivalent model.
10. **REPAIRS:** Normal wear and tear is expected. Any repairs needed that are not caused by deliberate physical action, will be the responsibility of the Lessor.
11. **INSURANCE:** Lessee shall be responsible to maintain insurance on the Equipment with losses payable to Lessor.
12. **PROCESSING/COMMISSIONS:** Lessee will receive all but twenty-five cents of the \$_____ surcharge. These commissions can be deposited Monthly or Daily. Lessee will be able to monitor their commissions and statements online as stated in "MONITORING".

LESSEE (Merchant)

Name (PRINT)

Business Name

Title

Signature

Date

LESSOR (My ATM Guys)

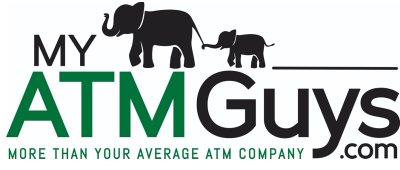
Name (PRINT)

Business Name

Title

Signature

Date



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Credit Card Recurring Payment Authorization Form

~ATM Lease~

Schedule your payments to be automatically charged to your credit card. Just complete and sign this form to get started!

Here's How Recurring Payments Work:

You authorize regularly scheduled charges to your Visa, MasterCard, American Express or Discover card. You will be charged each billing period for the total amount due for that period. A receipt will be emailed to you and the charge will appear on your credit card statement. You agree that no prior-notification is required. If your bill is more than the agreed lease amount, or the payment date changes, you will receive notice from us at least 10 days prior to the payment being collected.

Please complete the information below:

I _____ authorize My ATM Guys, Inc. to charge my credit card
(full name)

indicated below on the 10th day of each Month for payment of my ATM Lease.

Billing Address _____ Phone# _____

City, State, Zip _____ Email _____

Account Type: Visa MasterCard Amex Discover

Cardholder Name _____

Account Number _____

Expiration Date _____

CVV (3 digit number on back of Visa/MC, 4 digits on front of AMEX) _____

SIGNATURE _____

DATE _____

I authorize My ATM Guys, inc., to charge the credit card indicated in this authorization form according to the terms outlined above. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next business day. I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify the business in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. This payment authorization is for the type of bill indicated above. I certify that I am an authorized user of this credit card and that I will not dispute the scheduled payments with my credit card company provided the transactions correspond to the terms indicated in this authorization form.