

**BILLER ORDER FORM
INVOICE TYPE PARAMETER SHEET**

Invoice Type Parameters must be completed for each invoice type

Invoice Type	Non-Utility	Pricing Model	Non-Submitter
Biller Pays Network Fees		No	

CURRENT BILLING DETAILS

Please indicate how many bills are sent monthly by placing the bill count for each month below:

JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
100	100	100	100	100	100	100	100	100	100	100	100

Avg CC Transaction \$	100.00	Max Invoice \$	120.00	Bill Frequency	Monthly	Avg. Bills Per Month	100
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PRODUCTS AND SERVICES

Products and Services	[Cloud Pay]
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TRANSACTIONAL PRICING (Paid by Biller)

Payment Source Description	Payment Method	Fee Rate %	Fee Amount \$	Additional Fee \$
All Payment Sources	Credit/Debit		\$3.50	
All Payment Sources	ACH/EFT		\$1.95	

TRANSACTIONAL PRICING EXCEPTIONS

SERVICE FEES (Paid by Payer)

Payment Source Description	Payment Method	Fee Amount	Calculation Type	Min. Fee (\$) per Transaction
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SERVICE FEE EXCEPTIONS

MAX PAYMENT CAP

Card and PayPal Max (\$)	300	ACH Max (\$)	300
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BILLER BANK ACCOUNT (FOR DEPOSITS AND CHARGEBACKS)

Note: must include voided business check or bank letter for each unique account

Routing #		Last 4 Acct #		Last 4 Acct # for OBD	
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NOTES / SPECIAL HANDLING

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SALES INFORMATION							
IC Sales Rep	Alfred Carcieri			Vertical	Utility		
Order Date	2/7/2024	Sales Partner		Software Partner	RecDesk		
PRODUCTS AND SERVICES							
Products	[Cloud Pay]						
PAYMENT METHODS ACCEPTED							
Payment Types	[American Express] [VISA/Mastercard/Discover] [ACH/EFT]						
BILLER INFORMATION							
Ownership Type	Government			Phone	(317) 732-4532	Fax	
Legal Name	Town of Whitestown			Website URL	http://whitestown.in.gov/		
Address 1	6210 Veterans Drive			Bus. Open Date	1851		
Address 2				Federal Tax ID	35-6006738		
City	Whitestown			<i>*Federal Tax ID and Legal Name must match on all documents</i>			
State	IN	ZIP	46075				
BILLER CONTACT							
Primary Contact Name	Matt Sumner						
Phone	(317) 732-4532						
Email Address	msumner@whitestown.in.gov						
SIGNING AUTHORITY							
Name	Matt Sumner			Title	Clerk-Treasurer		
Phone	(317) 732-4532	Fax		Email Address	msumner@whitestown.in.gov		
BILLER PRICING							
Description	Interval	Cost Type	Cost				
Cloud Access Fee	Monthly	Fixed (\$)	\$50.00				
Credit Card - Chargeback Fee Non-Submitter	Per Transaction	Fixed (\$)	\$15.00				
EFT - ACH Reject Fee Non-Submitter	Per Transaction	Fixed (\$)	\$15.00				
HARDWARE							
Card Reader Type		Quantity		Cost per Reader		Billing Interval	Monthly
Card Reader							
Shipping Addr. (if different than location address)							
Kiosk Type	Device Quantity	Per Device Txn Min	Note: Biller will be charged for the minimum number of transactions listed to left each month per kiosk unity. In addition, if the Biller's order includes kiosks then the terms and conditions of Kiosk Managed Standard SOW (and applicable schedules) are hereby agreed and incorporated by reference				
Standard/In-Door		750					
Thru-Wall		800					
Outdoor Model		850					
BILLER BANK INFO							
Billing Method	Direct Debit			Note: Must include voided business check or bank letter for each unique account			

Name on Account		Bank Name	
Bank Address		Phone	
Routing #		Last 4 Acct #	

DATA RETENTION

Months to Keep	24	*Additional Fees apply if greater than 24 months
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NOTES/SPECIAL HANDLING

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CERTIFICATION AND AGREEMENT

- A. By signing below, the Biller hereby ratifies its authorization for Invoice Cloud, Inc. ("Invoice Cloud") to execute debit/credit entries to its checking/deposit account(s) indicated above at the depository financial institution(s) named above and to debit/credit the same such account(s). The Biller acknowledges that the origination of ACH transactions to its account(s) must comply with the provisions of U.S. law. This authority is to remain in full force and effect until (i) Invoice Cloud has received written notification (by electronic or U.S. mail) from the Biller of its revocation in such time and manner as to allow Invoice Cloud a reasonable opportunity to act on it, but not less than 10 business days notice; and (ii) all obligations of the Biller to Invoice Cloud that have arisen under this Agreement and all other agreements have been paid in full. The Biller must also notify Invoice Cloud, in writing, (by electronic or U.S. mail) when a change in account number(s) or bank has occurred at which time this authorization shall apply to such new/changed account. This notification must be received within 10 business days of change. A fee will be charged for any returned ACH debits.
- B. By signing below, the Biller named: (1) has read, agreed to, ratifies the Biller Agreement, Biller T+C and other Order Forms previously executed by the Biller, and (2) certifies to Invoice Cloud that he/she is authorized to sign this Add on to the Biller Order Form; (3) certifies that all information and documents submitted in connection with this Order Form are true and complete; (4) authorizes Invoice Cloud or its agent to verify any of the information given, including credit references, and to obtain credit reports (including a spouse if in a community property state); (5) agrees to pay the Monthly Access Fee through the last day of the month following the effective date of termination as provided in the Billing Agreement; (6) agrees that Biller and each transaction submitted will continue to be bound by the Order Form and the Biller Agreement in its entirety and any new agreement forms executed herewith; (7) If the Biller's order includes kiosks, then the terms and conditions of Kiosk Managed Services Standard SOW (and applicable schedules) are hereby agreed and incorporated by reference.(8) agrees that Biller will submit transactions only in accordance with the information in this Add on to the Biller Order Form and Biller Agreement and will immediately inform Invoice Cloud, by email (contracts@invoicecloud.com) if any information in this Order Form changes, and (9) the Biller agrees and understands that outstanding sums due and owing to Invoice Cloud., will be charged daily or monthly and debited from its current depository account. Non-sufficient funds for these debits are grounds for a change in fees or termination of this Agreement. In the event of non-payment of any sums due, Invoice Cloud reserves the right to withdraw such sums from the current depository account at any time to ensure payment of the same.
- C. Pay by Text: Standard data rates and text messaging rates may apply based on the payer's plan with their mobile phone carrier. Payer can opt out of text messaging at any time with Invoice Cloud. Partial payment or overpayment is not supported. Service fees may apply based on the biller set up with Invoice Cloud. Biller may not use the service for activities that violate any law, statute, ordinance or regulation.
- D. By signing below, the Biller hereby gives permission to Invoice Cloud to access his / her credit history via Trans Union, Equifax, or other credit-reporting agency.
- E. This Add on to the Order Form will become effective only when counter-signed by Invoice Cloud and upon execution by the Biller of such third party agreement required by Invoice Cloud to permit use of the payment function of the Service.
- F. If the Biller's order includes kiosks, then the terms and conditions of Kiosk Managed Services Standard SOW (and applicable schedules) are hereby agreed and incorporated by reference.

In WITNESS WHEREOF, the parties have executed this Agreement as of this day

Accepted by Biller:

X

Corporate Officer

Matt Sumner

Printed Name

Clerk-Treasurer

Title

Accepted by Invoice Cloud, Inc.:

X

Corporate Officer

Kevin W. O'Brien

Printed Name

President

Title