

# VISA/MASTERCARD

## INTAKE FORM

### CONTACT INFORMATION

First Name:  Last Name:

Title:  Phone Number:

Email Address:

### COMPANY INFORMATION

Legal Company Name:

Mailing Address:

Industry:  Company EIN #: -

### VISA/MASTERCARD INFORMATION

Between 2004-2018, how many years did your business accept Visa/Mastercard Branded cards as a form of payment?

Please list your Merchant ID Number(s) below if available:

To the best of your knowledge, what is your estimated yearly processing volume?

*Based on any 1 year between 2004-2018*

To the best of your knowledge, what is your estimated annual revenue?

*Based on any 1 year between 2004-2018*