



Request Explanation of Fees Form

In order to comply with **security / privacy** standards, you must submit this request **in writing** and **fax** directly to our Support Department.

Please use this form to request an explanation of your Merchant Account / Monthly Fees.

This request can only be made by the actual **Signer** on the Merchant Account Agreement.

Our fax number is: 866.431.4138

Required information:

Merchant **Doing Business As** Name _____

Your Name _____

Title _____

Email Address _____

Phone _____

LOGIN ID of your Gateway _____

Merchant ID Number: _____

(your merchant ID Number can be found on the Monthly Visa/MC statement that is mailed to you)

Please describe the Merchant Account / Monthly Fees you would like an explanation of:
(Please attach your Monthly Visa/MC Statement)

By signing below, I expressly authorize **Merchant Focus** or its affiliates to **fulfill the above request** in connection with my Merchant Account. (All information will be maintained strictly confidential.)

X

Owner/Officer Signature

Date