



2021 13th Street ♦ Ashland, Kentucky 41101
(800) 795-6899 ♦ (606) 325-1199 ♦ FAX (606) 324-7903 ♦ WWW.onlinewithmms.com

Merchant Management Systems, Inc.

**Rate Addendum
To Merchant Contract**

This change applies to all aspects of merchant
Account (credits and obligations)

- Merchant Name: _____
- Merchant Address: _____

- Merchant Phone: _____
- V/MC Merchant #: _____

- Discount Rate: Current _____ Requested _____
- Transaction Fee: Current _____ Requested _____
- Statement Fee: Current _____ Requested _____
- Debit Fee: Current _____ Requested _____

By signing this form I indicate that I am authorized to request the changes described above on behalf of the merchant listed above to the merchant account information used by Merchant Management Systems, Inc. I understand that this form is simply a request to have the above mentioned rates changed and that there is no implied guarantee of the approval of these rates with out the approval of Merchant Management Systems, Inc. I understand that if approved these changes will be made to the first full processing month from the date in which I sign this addendum. Furthermore agree that only the rates of my merchant processing agreement will be change and this form will have no effect on the terms and conditions of which I have signed.

Signature Required: _____ Date: _____