



Dear CashPractice.com Member,

We sincerely hope you we're pleased with your CashPractice.com membership. Since your membership included access to the Auto-Debit System®, you have a Merchant Account(s).

If you would like to close the Merchant Account, you will have to fill out the included letter and fax it to 877-291-5825.

The reason this is required is because the merchant accounts are “bank accounts” and cannot be closed by anyone except the owner of the accounts. We cannot make the request without this letter.

Failure to submit the letter will result in your merchant account remaining open and continue being subject to the monthly fee minimums.

If you are closing your CashPractice.com account only temporarily and plan on reopening in the near future, you may want to leave your merchant account open so that you can avoid having to reapply and pay another setup fee.

Again, thank you for allowing us to be of service to you and your company. We look forward to helping you again in the future.

Yours in excellent service,  
Membership Dept.  
Cash Practice Inc.

Fax: 877-291-5825

Cash Practice® Inc.  
9307 Carlton Hills Blvd., Suite A Santee, CA 92071  
877.FIFTY.50    [www.CashPractice.com](http://www.CashPractice.com)



# CANCELLATION REQUEST – MERCHANT ACCOUNT

Please return this completed form by **FAX:** **877-291-5825**

**MERCHANT INFORMATION** (PLEASE NOTE: If you accept other types (i.e. Amex) you must notify the respective company of the change.)

**MERCHANT ID** \_\_\_\_\_ **CONTACT NAME** \_\_\_\_\_

**DBA NAME** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**LOCATION ADDRESS, CITY, STATE, ZIP CODE (+4)** \_\_\_\_\_

**REQUESTED ACCOUNT CLOSURE DATE**

UPON TERMINATION OF THIS AGREEMENT BY MERCHANT, DURING THE INITIAL TERM OR RENEWAL TERM, MERCHANT SHALL PAY TO SAGE PAYMENT SOLUTIONS A TERMINATION FEE EQUAL TO AMOUNT STATED IN MERCHANT AGREEMENT TERMS AND CONDITIONS.

- Effective \_\_\_\_\_, please cancel my **Credit-Card Processing Account** with Sage Payment Solutions, **OR**  
ENTER DATE AS MM/DD/YYYY
- Effective \_\_\_\_\_, please cancel my **EFT / Virtual Check Account** with Sage Payment Solutions  
ENTER DATE AS MM/DD/YYYY

**REASON FOR ACCOUNT CLOSURE** (Select the reason best describing why you are closing your account (SELECT ONLY ONE).

- CLOSING ALL BUSINESS LOCATIONS
- DISCOUNT / PRICING ISSUES
- NOT HAPPY WITH SERVICE LEVELS  
(Customer Service)
- SALES REPRESENTATIVE / OFFICE
- OTHER (Please explain)
- DUPLICATE ACCOUNT  
(Please list Merchant ID's for open accounts below)
- EQUIPMENT / PRODUCT ISSUES
- NOT ENOUGH CREDIT CARD BUSINESS
- STATEMENTS DO NOT ARRIVE IN A TIMELY MANNER
- SOLD BUSINESS / NEW OWNERS
- FUNDING CHARGEBACK ISSUES
- CHANGED PROCESSOR

WHAT COULD SAGE PAYMENT SOLUTIONS HAVE DONE TO CONTINUE SERVING YOUR PROCESSING NEEDS?

**SIGNATURE AND ACCEPTANCE**

I understand that my deposit account will continue to be billed monthly fees until receipt of the completed closure form. My account may also be debited for any outstanding processing fees, as well as a termination fee if applicable. I understand future chargebacks, if any, will also be debited from my deposit account.  
Your accounts will be closed by the end of the month if received five (5) business days prior to the last day of the month.

BY SIGNING BELOW I CERTIFY THAT I AM THE OWNER (IF PRIVATELY OWNED) OR THE AUTHORIZED OFFICER (IF INCORPORATED) AND HAVE THE AUTHORIZATION TO TERMINATE THIS ACCOUNT.

**I ALSO CERTIFY THAT ALL STATEMENTS INCLUDED IN THIS CANCELLATION FORM ARE TRUE AND BINDING, AND THAT THE SALES REPRESENTATIVE AND/OR COMPANY THAT ORIGINALLY SOLD ME SAGE'S MERCHANT PROCESSING HAS NOT SOLICITED OR SOLD TO ME PROCESSING FROM A COMPETITOR OF SAGE**

X \_\_\_\_\_  
**SIGNATURE** (MUST BE SIGNATORY ON FILE)

X \_\_\_\_\_  
**SIGNER'S NAME** (PLEASE PRINT)

X \_\_\_\_\_  
**SIGNATURE** (MUST BE SIGNATORY ON FILE)

X \_\_\_\_\_  
**SIGNER'S NAME** (PLEASE PRINT)

X \_\_\_\_\_  
**SIGNER'S TITLE** (PLEASE PRINT)

X \_\_\_\_\_  
**DATED**

**MERCHANT ID'S FOR ACCOUNTS TO REMAIN OPEN**

_____	_____	_____	_____
_____	_____	_____	_____

