

Send this form with your last month's credit card processing statement:



FAX it to 1-800-704-9416



SCAN & UPLOAD at psfs.com/upload



MAIL to Professional Solutions Financial Services
14001 University Avenue
Clive, Iowa 50325-8258

CREDIT CARD PROCESSING

EXPRESS REQUEST CHALLENGE FORM

- YES, my most recent credit card processing statement is attached.**
Send a savings comparison and \$100 if you can't save me money.
- I don't accept credit cards. **Send me a quote.**
- YES, I'm interested in a no-cost credit card terminal**
to use for as long as I process through Professional Solutions.

Please complete: Number of pages including this cover page: _____

Name: _____

Address: _____

Address: _____

City: _____ State: _____ ZIP: _____

Name of Business: _____

Contact Name: _____

Business Phone: _____

Fax Number: _____

Email Address: _____

Your email address will never be sold. It will be used to send you important notices.



Questions? Call 1-800-960-9002, ext. 5104