

# Voyager Tax Exempt Participation Request

<b>Merchant Name -</b>
<b>Merchant ID* -</b>
<b>Contact Phone number -</b>
<b>Contact Name -</b>
<b>e-mail address -</b>
<b>Fax Number -</b>

Pursuant to the agreement between the above Merchant ("Merchant") and First Data Merchant Services Corporation ("FDMS"), pursuant to which, FDMS provides certain electronic funds transfer services involving credit and debit cards, Merchant hereby provides FDMS with the following information concerning Merchant's tax-exempt participation.

*\*list all MID's that will participate or attach a list*

## **Tax Exempt Categories: (Please check all that apply)**

- Federal Gas
- Federal Diesel
- State Primary Motor Fuel (excise tax)
- State Secondary Motor Fuel
- State Diesel
- City Tax
- County Tax
- State Sales Tax (non-fuel purchases)

Reporting is available via ClientLine, FDMS's reporting software. If you do not have access to ClientLine, please contact FDMS to receive information on obtaining the reporting product. If you elect not to use Clientline for reporting, you will receive a report sent via email or fax that will contain information needed for your tax filings.

**Please select method of delivery:**      Fax      e-mail      **Report Sent:**      Daily      Weekly      Monthly

By your signature below, you acknowledge that It is your sole responsibility to notify FDMS in writing of any change in tax exemption participation of categories above. Further, you acknowledge that FDMS is acting solely as a processor of transactions and is relying upon your instruction with regard to the subject matter of this form. It is your responsibility to collect any and all taxes applicable to transactions performed at your locations, including without limitation, to file for any refund from the appropriate tax authorities. In this regard, FDMS shall have no liability whatsoever arising out of or related to any errors of omissions of any merchant concerning the instruction of the merchant as contemplated in this form. You further represent and warrant that you are representative of Merchant, duly authorized to complete, sign and return this form on Client's behalf.

**Owner/Authorized Signature:**

**X**

**Date:**