

# Equipment Purchase Form

Merchant # \_\_\_\_\_

Store name \_\_\_\_\_ Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Sales rep \_\_\_\_\_

Equipment	Unit Price	Quantity	Total Price
Omni 3750-Dial	\$499.00		
Omni 3750-Dual Comm	\$549.00		
Hypercom T7 Plus	\$349.00		
Nurit 8000 (wireless)	\$799.00		
Way System (wireless)	\$695.00		
Pin Pad 1000	\$149.00		
PC Charge	\$300.00		
Authorize.net	\$150.00		
Imprinter	\$25.00		
Other			
Other			

\_\_\_\_\_ Subtotal

\_\_\_\_\_ Tax

\_\_\_\_\_ Shipping

\_\_\_\_\_ **Total**

**Method of Payment:**

**Check attached:** # \_\_\_\_\_

**Debit bankcard account**

**Credit card:**  
Account # \_\_\_\_\_  
Exp. date \_\_\_\_\_

**Payment plan - please complete adjacent box.**

**Office Use Only**

Date processed \_\_\_\_\_

Processed by \_\_\_\_\_

Auth # \_\_\_\_\_

Processor \_\_\_\_\_

Terminal ID needed: New \_\_\_\_\_ Additional \_\_\_\_\_

**Payment Plan:**

Total due \$ \_\_\_\_\_

Down payment (40%) — \$ \_\_\_\_\_

Remaining balance \$ \_\_\_\_\_

Number of payments 1 2 3 4 5  
*(a \$10 service fee will be added to each payment)*

Amount of regular ACH or  
credit card payment \$ \_\_\_\_\_

*Payment calculation formula (Remaining balance ÷ number of payments + \$10)*

Payment Type: CC ACH

*I understand that I am selecting to pay for the above noted equipment via a regular ACH withdrawal from the checking account or via credit card payment noted. I agree to honor these charges and to maintain appropriate funds or credit limits with the account used for these payments. If an ACH or credit card is rejected, I authorize MRS to deduct all remaining funds owed from my credit card processing account.*

ABA \_\_\_\_\_ DDA \_\_\_\_\_  
*(Attach a voided check)*

Card # \_\_\_\_\_ Exp. date \_\_\_\_\_

Merchant Initials \_\_\_\_\_

MRS, Inc., makes no warranties (including any warranties as to merchantability or fitness) either express or implied with respect to the property. Buyer shall be limited to the warranties of the respective manufacturers of the products sold.

Signature \_\_\_\_\_ Title \_\_\_\_\_ Printed name \_\_\_\_\_ Date \_\_\_\_\_