

Payment Options

Wire and ACH Information: Smart Choice Communications, LLC.

> JP Morgan Chase 445 Park Avenue New York, NY 10022

Swift Code: CHASUS33 ABA: 021000021 Acct: 6302653931

<u>Mailing Address:</u> SmartChoice PO Box 2693 New York, NY 10108-2693

Credit Card Authorization Form: See Following Page



Credit Card Authorization Form

INSTRUCTIONS

- 1. Complete the form
- 2. Return the completed, signed form for prompt credit to the account. Email to billing@smartchoiceus.com or fax to 646-666-5121

| SELECT ONE | □ NEW TRANSACTION |
|---|-----------------------|
| | CHANGE OF INFORMATION |
| CLIENT ACCOUNT NAME: | |
| CLIENT ACCOUNT NUMBER# | |
| | |
| PAYMENT FREQUENCY: | SET UP AUTOPAYMENT |
| | ONE-TIME CHARGE |
| | |
| ACCOUNT TYPE: | AMERICAN EXPRESS |
| | DISCOVER |
| | □ MASTERCARD |
| | □ VISA |
| | |
| PAYMENT AMOUNT: (NOT APPLICABLE TO MONTHLY RECURRING PAYEES) | |
| CARDHOLDER NAME: | |
| CREDIT CARD NUMBER: | |
| EXPIRATION DATE: | |
| CVV / SECURITY CODE: | |
| | |
| CREDIT CARD BILLING ADDRESS: | |
| | |
| CITY, STATE, ZIP:: | |
| PHONE NUMBER: | |
| EMAIL: | |
| TODAY'S DATE: | |
| | |
| SIGNATURE: | |

I, (NAME)

HEREBY AUTHORIZE SMART CHOICE COMMUNICATIONS TO CHARGE THE

CREDIT CARD INDICATED ABOVE ACCORDING TO THE TERMS OUTLINED BELOW. THIS PAYMENT AUTHORIZATION IS FOR THE GOODS/SERVICES DETAILED IN THE SIGNED MASTER SERVICE AGREEMENT, AND IS VALID FOR THE PERIOD SPECIFIED ABOVE. FURTHERMORE, I CERTIFY THAT I AM AN AUTHORIZED USER OF THIS CREDIT CARD AND THAT I WILL NOT DISPUTE THE PAYMENT WITH MY CREDIT CARD COMPANY, AS LONG AS THE TRANSACTION CORRESPONDS TO THE TERMS INDICATED IN THIS FORM.

Pursuant to the terms of the above Agreement between Client and Smart Choice Communications, the above Client hereby authorizes Smart Choice Communications to charge Client's credit card for the above-referenced amount (in the case of a one-time payment). In the case of monthly recurring payees, the Client's credit card will be charged each month for the amounts then due under the above referenced Agreement, and these amounts may vary month to month. Smart Choice Communications may initiate such charges until all amounts due under the Agreement are paid in full or until Smart Choice Communications has received from Client written notice revoking this authorization. Client understands that this authorization in o alters or lessens its obligations under the Agreement including those provisions regarding the amount of payments, when payments are due, the application of payments, the assessment of late charges or the determination of delinquencies.



E-Check Authorization Form

INSTRUCTIONS

1. Complete the form below to authorize E-Check payments to Smart Choice Communications.

2. Please return the completed and signed form by emailing it to <u>billing@smartchoiceus.com</u> or fax it to 646-666-5121.

| Name on Account | | | |
|------------------|----------|---------|------|
| Name of the Bank | <: | | |
| Routing Number: | | | |
| Account Number: | | | |
| Account Type: | Checking | Savings | |

I understand that I control my payment and if at any time I decide to disconnect the E-Check payment plan, I will notify Smart Choice Communications in writing.

Signature

Date

If you have any questions regarding this process, please contact one of our customer service representatives at <u>(877) 598-7526</u> or email us at <u>billing@smartchoiceus.com</u>

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► Go to www.irs.gov/FormW9 for instructions and the latest information.

| | 1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. | | | | | | |
|---|---|--|---|--|--|--|--|
| | Smart Choice Communications LLC | | | | | | |
| | 2 Business name/disregarded entity name, if different from above | | | | | | |
| , cri | | | | | | | |
| on page 3 | 3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Ch following seven boxes. | 4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): | | | | | |
| e. Is or | Individual/sole proprietor or C Corporation S Corporation Partnership single-member LLC | Trust/estate | Exempt payee code (if any) | | | | |
| type ctior | ✓ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partne | rship) ► | | | | | |
| Print or type. Specific Instructions | Note: Check the appropriate box in the line above for the tax classification of the single-member or LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single is disregarded from the owner should check the appropriate box for the tax classification of its own | owner of the LLC is gle-member LLC that | Exemption from FATCA reporting code (if any) | | | | |
| | ☐ Other (see instructions) ► | | (Applies to accounts maintained outside the U.S.) | | | | |
| | 5 Address (number, street, and apt. or suite no.) See instructions. | Requester's name a | nd address (optional) | | | | |
| See | P.O. Box 2693 | | | | | | |
| ••• | 6 City, state, and ZIP code | | | | | | |
| | New York, NY 10108-2693 | | | | | | |
| | 7 List account number(s) here (optional) | | | | | | |
| | | | | | | | |
| Par | t I Taxpayer Identification Number (TIN) | | | | | | |
| oacku reside | your TIN in the appropriate box. The TIN provided must match the name given on line 1 to av p withholding. For individuals, this is generally your social security number (SSN). However, t nt alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other s, it is your employer identification number (EIN). If you do not have a number, see <i>How to ge</i> | or a | urity number | | | | |
| TIN, la | | or | identification number | | | | |
| Mata. | If the account is in more than one name, and the instructions for line 1. Also and What Name | and Employer | identification number | | | | |

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- 3. I am a U.S. citizen or other U.S. person (defined below); and

4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

| Sign Here | Signature of U.S. person ► | Jarrett Wolfe | Date ► | 1/1/2023 | |
|--------------|-------------------------------|---------------|--------|----------|--|
| | | | | | |

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW9*.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)

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- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest),
- 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.