



MERCHANT ACCOUNT CANCELLATION REQUEST

MERCHANT ACCOUNT INFORMATION:

Date: (mm / dd / yy) _____ / _____ / _____

MID: _____

Company Name: _____

Authorized Representative: _____
(Please print name)

- I would like to cancel the above mentioned merchant account effective:

Date: (mm / dd / yy) _____ / _____ / _____

REASON:

- Rates
- Customer Service
- Business Closure
- Other : _____

Authorized Representative: _____
(Please print name)

Signature: _____

Please fax your cancellation request form to **1 866 322-2926**.

Merchant Support
Fax: 866 322-2926
support@merchant-support.com