

Authorize.Net Gateway Online Access Agreement

Client Name: _____ Auth.Net Gateway ID: _____

Authorization

This authorization grants permission to **MagnifyFundUS Inc.**, a third party, to be listed as an Account Contact to the Authorize.Net payment gateway listed above.

- **An Account Contact does not have access to the Merchant Interface and is created solely to receive account notification & daily settlement e-mails specifically used to calculate management fees as listed in the MagnifyFundUS Inc. client management fee agreement.**

This authority is to remain in full force and effect until Client has notified **MagnifyFundUS Inc.** at least 30 day in advance of our intent to terminate such authorization.

Signature of Authorized Principal (As signed on the MagnifyFundUS Inc. Client Agreement)

Date _____

Print Name _____

Phone _____

Email Address _____