

CheckFreePay Corporation
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IMPORTANT INFORMATION REGARDING REGULATORY REQUIREMENTS AND YOUR AGENT AGREEMENT FOR STATE OF NEW YORK AGENTS

RE: Official Compilation of Codes, Rules and Regulations of the State of New York
Title 3. Banking Department, § 406.5 Agency Contracts

In accordance with the above referenced regulation, I/we am an agent for CheckFreePay Corporation of New York, Inc. ("CheckFreePay"). I/We hereby provide the State of New York with this written and irrevocable consent to examine, have access to, and retain copies of all my/our books and records, wherever maintained, relating to the activities performed as Agent for CheckFreePay as outlined in the Agent Agreement that I/we signed.

Agent Location

Agent Address

City

State

ZIP Code

Agent Signature

Date