

SALES INFORMATION			
IC Sales Rep	Carlyn Altheide	Vertical	Local Gov (Util, Tax, Misc)
Order Date	10/26/2021	Billing Software	Harris - Advanced

BILLER INFORMATION			
Ownership Type	Government	Phone	(772) 871-5225 Fax
Legal Name	CITY OF PORT ST LUCIE	Website URL	https://www.cityofpsl.com/
Address 1	121 SW Port St. Lucie Boulevard	Bus. Open Date	1961
Address 2		Federal Tax ID	59-6141662
City	Port St. Lucie	<i>*Federal Tax ID and Legal Name must match on all documents</i>	
State	FL	ZIP	34984

BILLER CONTACT	
Primary Contact Name	Regina Linsley
Phone	772-873-6343
Email Address	rlinsley@cityofpsl.com

SIGNING AUTHORITY			
Name	Russ Blackburn	Title	City Manager
Phone	(772) 871-5225 Fax	Email Address	rblackburn@cityofpsl.com

BILLER BANK ACCOUNT (FOR INVOICE CLOUD AND NETWORK FEES, AND AS PROVIDED IN THE BILLER AGREEMENT)	
<b>Note: Must include voided business check or bank letter for each unique account</b>	
Billing Method	Direct Debit
Routing #	Last 4 Acct #

PAYMENT METHODS ACCEPTED	
Payment Methods	[American Express] [VISA/Mastercard/Discover] [PayPal] [ACH/EFT]

BILLER PRICING (see Invoice Type Parameter Sheet(s) for invoice-type-specific pricing)*			
Description	Interval	Cost Type	Cost
Biller Portal Access Fee	Monthly	Fixed (\$)	\$190.00
Credit Card - Chargeback Fee Non-Submitter	Per Transaction	Fixed (\$)	\$5.00
EFT - ACH Reject Fee Non-Submitter	Per Transaction	Fixed (\$)	\$5.00
PayPal Brands - Chargeback Fee (PayPal Brands)	Per Transaction	Fixed (\$)	\$5.00

HARDWARE					
Card Reader Type	EMV	Quantity	1	Cost per Reader	15.00
Card Reader	ISC Touch 250			Billing Interval	Monthly
Shipping Address (if different than location address)					

**DATA RETENTION**

Months to Keep	24	*Additional Fees apply if greater than 24 months
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**IMPLEMENTATION CHARGES**

Description	Interval	Cost
Implementation (per SOW)	One-Time	\$0.00 (WAIVED)

**NOTES/SPECIAL HANDLING**

Monthly Biller Portal Access Fee has been reduced from \$200 to \$190 per month. This amount is intended to off set the City's annual cost of monitoring Invoice Cloud's insurance coverage.

[signature page follows]

CERTIFICATION AND AGREEMENT

- A. By signing below, the Biller hereby ratifies its authorization for Invoice Cloud, Inc. ("Invoice Cloud") to execute debit/credit entries to the Biller Bank Account(s) indicated above at the depository financial institution(s) named above and to debit/credit the same such account(s). The Biller acknowledges that the origination of ACH transactions to its account(s) must comply with the provisions of U.S. law. This authority is to remain in full force and effect until (i) Invoice Cloud has received written notification (by electronic or U.S. mail) from the Biller of its revocation in such time and manner as to allow Invoice Cloud a reasonable opportunity to act on it, but not less than 10 business days notice; and (ii) all obligations of the Biller to Invoice Cloud that have arisen under this Agreement and all other agreements have been paid in full. The Biller must also notify Invoice Cloud, in writing, (by electronic or U.S. mail) when a change in Biller Bank Account account number(s) or bank has occurred at which time this authorization shall apply to such new/changed Biller Bank Account. This notification must be received no less than 10 business days in advance of any change. A fee will be charged for any returned or rejected ACH debits.
- B. By signing below, the Biller named: (1) has read, agreed to, ratifies the Biller Agreement, Biller T+C's (referenced in the Biller Agreement) and other Order Forms previously executed by the Biller, and (2) certifies to Invoice Cloud that he/she is authorized to sign this Order Form; (3) certifies that all information and documents submitted in connection with this Order Form are true and complete; (4) authorizes Invoice Cloud or its agent to verify any of the information given, including credit references, and to obtain credit reports ; (5) agrees to pay the Monthly Access Fee through the last day of the month following the effective date of termination as provided in the Billing Agreement; (6) agrees that Biller and each transaction submitted will continue to be bound by the Order Form and the Biller Agreement in its entirety and any new agreement forms executed herewith; (7) agrees that Biller will submit transactions only in accordance with the information in this Biller Order Form and Biller Agreement and will immediately inform Invoice Cloud, by email (contracts@invoicecloud.com) if any information in this Order Form changes, and (8) In the event of non-payment of any sums due, Invoice Cloud reserves the right to withdraw such sums from the Biller Bank Account at any time to ensure payment of the same.
- C. Pay by Text: Standard data rates and text messaging rates may apply based on the payer's plan with their mobile phone carrier. Payer can opt out of text messaging at any time with Invoice Cloud. Partial payment or overpayment is not supported. Biller may not use the service for activities that violate any law, statute, ordinance or regulation.
- D. This Biller Order Form will become effective only when signed by Invoice Cloud.


In WITNESS WHEREOF, the parties have executed this Agreement as of this day

Accepted by Biller:

Accepted by Invoice Cloud, Inc.:

X

X



Corporate Officer/Authorized Official

Corporate Officer

Russ Blackburn

Thomas E. Griffin

Printed Name

Printed Name

City Manager

President

Title

Title

**BILLER ORDER FORM  
INVOICE TYPE PARAMETER SHEET**

*Invoice Type Parameters must be completed for each invoice type*

Invoice Type	Utility Systems	Pricing Model	Non-Submitter
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CURRENT BILLING DETAILS											
Please indicate how many bills are sent monthly by placing the bill count for each month below:											
JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
81890	81890	81890	81890	81890	81890	81890	81890	81890	81890	81890	81890

Avg CC Transaction \$	108.00	Max Invoice \$	125000.00	Bill Frequency	Monthly	Avg. Bills Per Month	81890
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PRODUCTS AND SERVICES	
Products and Services	[EBPP] [IVR] [OBD] [In-line Donations] [Point of Sale]

TRANSACTIONAL PRICING (Paid by Biller)					
Payment Source Description	Payment Method	Fee Rate %	Fee Amount \$	Additional Fee \$	Biller Pays Network Fees
All Payment Sources	Credit/Debit/PayPal	1.99%			No
All Payment Sources	ACH/EFT		\$0.50		No
Online Bank Direct	All Payment Methods		\$0.25		No
IVR	All Payment Methods		\$0.25		No
<b>TRANSACTIONAL PRICING EXCEPTIONS</b>					

SERVICE FEES (Paid by Payer)					
Payment Source Description	Payment Method	Fee Amount	Calculation Type	Max Payment \$	Min. Fee (\$) per Transaction
All Payment Sources	Credit/Debit/PayPal			\$125000.00	
All Payment Sources	ACH/EFT			\$125000.00	
<b>SERVICE FEE EXCEPTIONS</b>					

BILLER BANK ACCOUNT (FOR DEPOSITS AND CHARGEBACKS)			
<i>Note: must include voided business check or bank letter for each unique account</i>			
Routing #		Last 4 Acct #	

NOTES / SPECIAL HANDLING
No paperless transaction charges for existing paperless enrollments migrated to IC for the go live.

**BILLER ORDER FORM  
INVOICE TYPE PARAMETER SHEET**

*Invoice Type Parameters must be completed for each invoice type*

Invoice Type	Utility Systems Donations	Pricing Model	Non-Submitter
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CURRENT BILLING DETAILS											
Please indicate how many bills are sent monthly by placing the bill count for each month below:											
JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC

Avg CC Transaction \$		Max Invoice \$		Bill Frequency		Avg. Bills Per Month	
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PRODUCTS AND SERVICES	
Products and Services	[In-line Donations]

TRANSACTIONAL PRICING (Paid by Biller)					
Payment Source Description	Payment Method	Fee Rate %	Fee Amount \$	Additional Fee \$	Biller Pays Network Fees
All Payment Sources	Credit/Debit/PayPal				
All Payment Sources	ACH/EFT				
<b>TRANSACTIONAL PRICING EXCEPTIONS</b>					

SERVICE FEES (Paid by Payer)					
Payment Source Description	Payment Method	Fee Amount	Calculation Type	Max Payment \$	Min. Fee (\$) per Transaction
All Payment Sources	Credit/Debit/PayPal				
All Payment Sources	ACH/EFT				
<b>SERVICE FEE EXCEPTIONS</b>					

BILLER BANK ACCOUNT (FOR DEPOSITS AND CHARGEBACKS)			
<i>Note: must include voided business check or bank letter for each unique account</i>			
Routing #		Last 4 Acct #	

NOTES / SPECIAL HANDLING



**BILLER ORDER FORM  
INVOICE TYPE PARAMETER SHEET**

*Invoice Type Parameters must be completed for each invoice type*

Invoice Type	New Service Residential	Pricing Model	Non-Submitter
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CURRENT BILLING DETAILS											
Please indicate how many bills are sent monthly by placing the bill count for each month below:											
JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
1100	1100	1100	1100	1100	1100	1100	1100	1100	1100	1100	1100

Avg CC Transaction \$	140.00	Max Invoice \$	125000.00	Bill Frequency	Monthly	Avg. Bills Per Month	1100
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PRODUCTS AND SERVICES	
Products and Services	[Cloud Pay]

TRANSACTIONAL PRICING (Paid by Biller)					
Payment Source Description	Payment Method	Fee Rate %	Fee Amount \$	Additional Fee \$	Biller Pays Network Fees
All Payment Sources	Credit/Debit/PayPal	1.99%			No
All Payment Sources	ACH/EFT		\$0.50		No
<b>TRANSACTIONAL PRICING EXCEPTIONS</b>					

SERVICE FEES (Paid by Payer)					
Payment Source Description	Payment Method	Fee Amount	Calculation Type	Max Payment \$	Min. Fee (\$) per Transaction
All Payment Sources	Credit/Debit/PayPal			\$125000.00	
All Payment Sources	ACH/EFT			\$125000.00	
<b>SERVICE FEE EXCEPTIONS</b>					

BILLER BANK ACCOUNT (FOR DEPOSITS AND CHARGEBACKS)			
<i>Note: must include voided business check or bank letter for each unique account</i>			
Routing #		Last 4 Acct #	

NOTES / SPECIAL HANDLING

**BILLER ORDER FORM  
INVOICE TYPE PARAMETER SHEET**

*Invoice Type Parameters must be completed for each invoice type*

Invoice Type	New Service Non-Residential	Pricing Model	Non-Submitter
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CURRENT BILLING DETAILS											
Please indicate how many bills are sent monthly by placing the bill count for each month below:											
JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
5	5	5	5	5	5	5	5	5	5	5	5

Avg CC Transaction \$	200.00	Max Invoice \$	125000.00	Bill Frequency	Monthly	Avg. Bills Per Month	5
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PRODUCTS AND SERVICES	
Products and Services	[Cloud Pay]

TRANSACTIONAL PRICING (Paid by Biller)					
Payment Source Description	Payment Method	Fee Rate %	Fee Amount \$	Additional Fee \$	Biller Pays Network Fees
All Payment Sources	Credit/Debit/PayPal	1.99%			No
All Payment Sources	ACH/EFT		\$0.50		No
<b>TRANSACTIONAL PRICING EXCEPTIONS</b>					

SERVICE FEES (Paid by Payer)					
Payment Source Description	Payment Method	Fee Amount	Calculation Type	Max Payment \$	Min. Fee (\$) per Transaction
All Payment Sources	Credit/Debit/PayPal			\$125000.00	
All Payment Sources	ACH/EFT			\$125000.00	
<b>SERVICE FEE EXCEPTIONS</b>					

BILLER BANK ACCOUNT (FOR DEPOSITS AND CHARGEBACKS)			
<i>Note: must include voided business check or bank letter for each unique account</i>			
Routing #		Last 4 Acct #	

NOTES / SPECIAL HANDLING

**BILLER ORDER FORM  
INVOICE TYPE PARAMETER SHEET**

*Invoice Type Parameters must be completed for each invoice type*

Invoice Type	Residential New Construction	Pricing Model	Non-Submitter
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CURRENT BILLING DETAILS											
Please indicate how many bills are sent monthly by placing the bill count for each month below:											
JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
400	400	400	400	400	400	400	400	400	400	400	400

Avg CC Transaction \$	6000.00	Max Invoice \$	125000.00	Bill Frequency	Monthly	Avg. Bills Per Month	400
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PRODUCTS AND SERVICES	
Products and Services	[Cloud Pay]

TRANSACTIONAL PRICING (Paid by Biller)					
Payment Source Description	Payment Method	Fee Rate %	Fee Amount \$	Additional Fee \$	Biller Pays Network Fees
All Payment Sources	Credit/Debit/PayPal	1.99%			No
All Payment Sources	ACH/EFT		\$0.50		No
<b>TRANSACTIONAL PRICING EXCEPTIONS</b>					

SERVICE FEES (Paid by Payer)					
Payment Source Description	Payment Method	Fee Amount	Calculation Type	Max Payment \$	Min. Fee (\$) per Transaction
All Payment Sources	Credit/Debit/PayPal			\$125000.00	
All Payment Sources	ACH/EFT			\$125000.00	
<b>SERVICE FEE EXCEPTIONS</b>					

BILLER BANK ACCOUNT (FOR DEPOSITS AND CHARGEBACKS)			
<i>Note: must include voided business check or bank letter for each unique account</i>			
Routing #		Last 4 Acct #	

NOTES / SPECIAL HANDLING



**BILLER ORDER FORM  
INVOICE TYPE PARAMETER SHEET**

*Invoice Type Parameters must be completed for each invoice type*

Invoice Type	HR Retirees	Pricing Model	Non-Submitter
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CURRENT BILLING DETAILS											
Please indicate how many bills are sent monthly by placing the bill count for each month below:											
JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
240	240	240	240	240	240	240	240	240	240	240	240

Avg CC Transaction \$	200.00	Max Invoice \$	125000.00	Bill Frequency	Monthly	Avg. Bills Per Month	240
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PRODUCTS AND SERVICES	
Products and Services	[EBPP]

TRANSACTIONAL PRICING (Paid by Biller)					
Payment Source Description	Payment Method	Fee Rate %	Fee Amount \$	Additional Fee \$	Biller Pays Network Fees
All Payment Sources	Credit/Debit/PayPal	1.99%			No
All Payment Sources	ACH/EFT		\$0.50		No
<b>TRANSACTIONAL PRICING EXCEPTIONS</b>					

SERVICE FEES (Paid by Payer)					
Payment Source Description	Payment Method	Fee Amount	Calculation Type	Max Payment \$	Min. Fee (\$) per Transaction
All Payment Sources	Credit/Debit/PayPal			\$125000.00	
All Payment Sources	ACH/EFT			\$125000.00	
<b>SERVICE FEE EXCEPTIONS</b>					

BILLER BANK ACCOUNT (FOR DEPOSITS AND CHARGEBACKS)			
<i>Note: must include voided business check or bank letter for each unique account</i>			
Routing #		Last 4 Acct #	

NOTES / SPECIAL HANDLING

**BILLER ORDER FORM  
INVOICE TYPE PARAMETER SHEET**

*Invoice Type Parameters must be completed for each invoice type*

Invoice Type	Assumptions & Subordinations	Pricing Model	Non-Submitter
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CURRENT BILLING DETAILS											
Please indicate how many bills are sent monthly by placing the bill count for each month below:											
JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
15	15	15	15	15	15	15	15	15	15	15	15

Avg CC Transaction \$	200.00	Max Invoice \$	125000.00	Bill Frequency	Monthly	Avg. Bills Per Month	15
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PRODUCTS AND SERVICES	
Products and Services	[Cloud Pay]

TRANSACTIONAL PRICING (Paid by Biller)					
Payment Source Description	Payment Method	Fee Rate %	Fee Amount \$	Additional Fee \$	Biller Pays Network Fees
All Payment Sources	Credit/Debit/PayPal	1.99%			No
All Payment Sources	ACH/EFT		\$0.50		No

**TRANSACTIONAL PRICING EXCEPTIONS**

SERVICE FEES (Paid by Payer)					
Payment Source Description	Payment Method	Fee Amount	Calculation Type	Max Payment \$	Min. Fee (\$) per Transaction
All Payment Sources	Credit/Debit/PayPal			\$125000.00	
All Payment Sources	ACH/EFT			\$125000.00	

**SERVICE FEE EXCEPTIONS**

BILLER BANK ACCOUNT (FOR DEPOSITS AND CHARGEBACKS)			
<i>Note: must include voided business check or bank letter for each unique account</i>			
Routing #		Last 4 Acct #	

NOTES / SPECIAL HANDLING