



Authorization Form to Accept Credit Card Transactions

Customer Name: _____

System Number: _____

I hereby authorize Campus Partners to accept credit card transactions from our student loan borrowers as a third party processor. Without this signed authorization form, I understand that Campus Partners will not allow our student loan borrowers to make payments by credit cards through mycampusloan.com or our staff to make payments by credit cards through System 3i. By agreeing to have Campus Partners accept credit card transactions, I understand that a service fee will be added to each credit card transaction amount. A summary total of all service fees will be added to your monthly invoice unless you elect to have these service fees paid by your student loan borrowers.

Please select from the following options:

_____ I understand the service fee will equal 3.00 % of the borrower's payment amount. I authorize Campus Partners to add the service fees assessed on credit card transaction amounts to our monthly invoice. I understand that borrowers from my school will be able to pay their bill using MasterCard, Visa, and Discover with this option.

_____ Please include the following special message on borrower billing statements (This message will be added to borrower billing statements for the next 90 days):

“Would you like to make a credit card payment? Now you can use Discover, MasterCard, or Visa to make a payment. Just log on to www.mycampusloan.com and select the Pay My Loan option. If you do not have a user ID, select the First Time User link, or call 1-800-334-8609 to pay by phone.”

_____ Do not include special message on my borrower's billing statements.

OR

_____ I understand the service fee will equal 3.00 % of the borrower's payment amount. I authorize Campus Partners to add the service fee assessed on the credit card transaction amount to the requested payment amount. I understand the borrower's student loan will be credited for the requested payment amount and Campus Partners will retain the assessed service fees. In this case, no service fees will be added to our monthly invoice. I understand that borrowers from my school will be able to pay their bill using MasterCard and Discover with this option.

_____ Please include the following special message on borrower billing statements (This message will be added to borrower billing statements for the next 90 days):

“Would you like to make a credit card payment? Now you can use Discover or MasterCard to make a payment. Just log on to www.mycampusloan.com and select the Pay My Loan option. If you do not have a user ID, select the First Time User link, or call 1-800-334-8609 to pay by phone. A 3% servicing fee will apply to all credit card payments.”

_____ Do not include special message on my borrower's billing statements.

Signed: _____

Name: _____

Title: _____

Date: _____

Return to: Campus Partners, Attn: Debra Pitts, P.O. Box 3176, Winston-Salem, NC 27102, Fax: (336) 607-2025