

\$Pictomoney 3121-D Fire Rd #165, Egg Harbor Twp, NJ 08234 USA Tel: 1-609-365-2444 Fax: 1-609-646-6014

Email: info@pictomoney.com ***** Recorded Message 3 Minutes 1-641-715-3460 Pin 904480# Ref 2#

Distributor Activation Kit One Time Set Up Fee Amount: **\$32.49 includes \$14.99 Auto Ship Access Fee and one membership fee \$17.50.** Billing Frequency is approximately the 3rd and 20th each month of \$17.50. Commission Paid BiMonthly. I can cancel the authorization with 30 days written notice to Pictomoney Inc.

Me

New Member Applicant First Name _____ Last Name _____

Address _____

City _____ State _____ Zip Code _____ Country _____

SSN or FED ID _____ We will send your W9 and with or without a Direct Deposit Form to USA Payroll NJ You will receive an IRS income statement annually (W2 Form) and if applicable a 1099 Form.

Email Address or if you Need an email address? Ask at the local Library.

Home Phone _____ or Cell Phone _____ Fax Number Optional _____

Date of Birth: Month _____ Day _____ Year _____ Gender/Check Male _____ Female _____

Sponsor Name and Sponsor Phone Number This can be left blank if you don't have a Sponsor.

Mail In

Pay by Check: or Money Order then send in one or both pages of application and the W9 Form and or without the Direct Deposit Form to the address above. Fill in and mail in or fax in or scan and email both and send your W9 Form. Pay by Payza Online: See below.

Check One

_____ I choose to Pay using a check or money order and mail it in
_____ I choose to Pay online using my Payza Account Complete Page 2 also.

Check One

_____ I wish to receive my commission payment by check USA Payroll NJ will send my checks
_____ I wish to receive my commission payment by Direct Deposit, USA Payroll NJ Form is enclosed

Agreement

I understand that no fee, purchase of products, services or sales aids is required to become a Pictomoney Member Distributor, but that I am purchasing the Pictomoney Monthly Newsletter. I understand, agree and choose to participate in this optional program. **By submitting** this application you agree that you have carefully read this entire agreement and that you willingly accept all of the terms and conditions herein. I agree that if any charge is dishonored, whether intentionally or inadvertently, Pictomoney shall be under no liability whatsoever. This authority is to remain in effect until Pictomoney Inc. receives written notification from me revoking the authorization that I am a member. **I have completed** and signed page 1 of the application also have enclosed a completed and signed W9 Form. And if applicable, enclosed a completed Direct Deposit Form with a voided check. And I have enclosed a check or money order for \$32.49. If using Payza to pay and or receive commissions I signed and enclosed Page 2 of the application.

Required All Members' Signature: X _____ Date: _____ Page
1 Mail, Email/Scan, Fax, Send both pages and W9 Form (see our website, How to Join) and or without a

Direct Deposit Form to: Pictomoney, Inc. We are a few miles away from Atlantic City, NJ.

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Automatic Payza Billing Authorization Form Page 2

You can use Payza: www.payza.com Payza Automatic Account Billing/or Use A Check or Money Order

Complete your Payza Account information get an account at www.payza.com

If you would like to enjoy the convenience of automatic billing, simply use Payza below or use a check or money order. You may cancel your membership at anytime with 30 days notice by contacting us in writing.

Payza Payment Information

I agree to pay Pictomoney to automatically bill me through Payza or I will send a check or money order as specified below. Distributor Activation Kit One time now. \$32.49 which includes my set up fee and the first membership fee. Then I will be billed \$17.50 for the following payments due on the 3rd and 20th of each month.

\$32.49 Includes One Time Set Up Fee Amount: \$14.99 and one month membership fee \$17.50.

Billing Frequency is approximately the 3rd and 20th of each month Amount: \$17.50.

Credit Card Information (To be completed by customer)

Note: Please get a Payza account to pay Online www.payza.com or use a check or money order. We will accept credit cards soon.

Payza Customer information

I will pay using my Payza Account.

Payza Account Name Print Name: _____

(Name As shown on Credit Card or Your Bank Account registered with Payza)

Payza Account Email Address: _____

USA Zip code (required) _____ Country _____

(Zip Code from Credit Card billing address) (For USA and International Countries)

_____ International Citizens Only I wish to receive my commission payment by Payza Online Account. Pictomoney Inc through Payza will send my commission payment

x

Signature

Dat3

All Members earn \$540.00 per month or more with our Power Payline, the Automatic Monthly Matrix. Automatic means money spills over from the people above you and your optional sign ups are included. The monthly matrix check amount inclines until you reach \$540.00 per month. You will be paid on any amounts under that monthly until your check reaches \$270.00 twice per month, \$540.00. If you want more income, then ad one membership per month, we will let you know when. We will remind you of the payment due twice per month. Remember it's one straight line of enrollment by seniority. We will show you how!

Page 2 Mail, Email/Scan, Fax, Send both pages and W9 Form and or without a Direct Deposit Form to: Pictomoney, Inc. We are a few miles away from Atlantic City, NJ.

FAX or Mail or Scan or Email - Your Application, Your W9 Form and if you would prefer Your Direct Deposit Form

All are in this file and at the right margin at www.info.pictomoney.com See How to Join.

Phila Vocia

Pictomoney, Inc.

Fax Transmission

Tel Number: 609-364-2444

Cell Number: 609-457-6885

Fax Number: 1-609-646-6014

Email: info@pictomoney.com

Number of Pages Including the Cover: _____

Date: _____

To: _____

From: _____

Comments: _____

Tape a Check is for FOR DIRECT DEPOSIT people ONLY. TAPE VOID CHECK BELOW or Deposit Slip (only accepted if the verbiage "ACH R/T appears before the routing number) Bank Letter or Other Documentation, see the Direct Deposit form under the words: One of the following... and follow the instructions in that paragraph with the boxes.

Tape

Tape

Tape

USA Payroll

Employee Direct Deposit Authorization Agreement

Client Number:
Client Name: **Pictomoney, Inc.**

I hereby authorize my employer, Pictomoney, Inc., (hereinafter COMPANY) to deposit any amounts owed me by initiating credit entries to my account at the financial institution (hereinafter BANK) indicated below. Further, I authorize BANK to accept and to credit any credit entries indicated by COMPANY to my account. In the event that COMPANY deposits funds erroneously into my account, I authorize COMPANY to debit my account for an amount not to exceed the original amount of the erroneous credit.

Employee Information

Employee No.

Employee Name (please print):

Social Security Number:

Begin Deposit:

Change Information:

Cancel:

Bank Information

Bank Name:

City:

State:

Checking (attach void check)	I wish to deposit (choose one)	\$ _____	<u>100</u> % Net/Gross	Entire Net Pay
Savings	I wish to deposit (choose one)	\$ _____	<u>100</u> % Net/Gross	Entire Net Pay
Other (C or S) (attach check)		\$ _____	<u>100</u> % Net/Gross	
Other (C or S) (attach check)		\$ _____	<u>100</u> % Net/Gross	

Please attach a voided check for checking accounts (deposit slips do not have the required information).

This authorization is to remain in full force and effect until COMPANY and BANK have received written notice from me of its termination in such time and in such manner as to afford COMPANY and BANK a reasonable opportunity to act on it.

Employee Signature: _____

Date: _____

Copies:

- USA Payroll
- Employer Copy
- Employee Copy

Request for Taxpayer Identification Number and Certification

**Give Form to the
requester. Do not
send to the IRS.**

Print or type
See Specific Instructions on page 2.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
5 Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
6 City, state, and ZIP code	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number																																
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or

Employer identification number																																		
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Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.*

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

