Request for Data Extraction to Company's Authorized Vendor

By completing and submitting this form, you are requesting Authorize.Net to extract the Customer Information Manager (CIM)/Automated Recurring Billing (ARB) data on file and send such data in an encrypted file via secure file transfer to Company's Authorized Vendor. The cost for this service is $250, which will be billed to the payment method on your Authorize.Net account.

Please complete and sign this original form, then return it by following these steps:
- Access and log into the Support Center directly or thru the Merchant Interface.
- Click **Support Cases** at the top of the Support Center.
- Under Create A Case click on the Support Case type needed.
  - **General Support** - Support Case for general questions, requests or issues.
- Complete the required fields for the Support Case type.
- Click **Submit** to complete creating your Support Case.
- You will next see your submitted Support Case and can then add the completed form.

Merchant Information

Payment Gateway ID:	Company Name ("Company"):	Company Phone:
_____	_____	_____
Company Address:		**City/State/ZIP Code:**
_____		_____

Reason for Extraction

☐ Switching to another gateway/payment provider

Please specify who: _____

☐ Closing account due to a lack of features

Which features: _____

☐ Closing account due to an integration issue

Please explain: _____

☐ Closing account because I'm unhappy with pricing

Please explain: _____

☐ I need my customer information for use with a third-party solution

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Data Extraction Information

Number of Records in the Extraction: _____	Requested Extraction Date: _____

Authorization to Submit the Request (requestor must be a duly authorized employee of Company, VP level or higher)

It is understood and agreed that, in consideration of $250 due and payable to Authorize.Net upon execution of this form, as a duly authorized employee, officer, or principal of Company, I do hereby request Authorize.Net to provide certain data pertaining to the sales of Company products or services stored in Authorize.Net's databases under the above-mentioned Payment Gateway ID to Company's vendor, _____, an authorized vendor of and will act on behalf of Company ("Authorized Vendor"). Company further understood and agreed that Company is solely responsibility for the protection and use of such data once in Company's Authorized Vendor's possession; and (iii) Authorize.Net will have no further obligations or responsibilities regarding the transfer or security of such data once in Company's Authorized Vendor's possession. The data will be used for the sole purpose which has been stated above under "Reason for Extraction". Company agrees to defend, indemnify, and save fully harmless Authorize.Net and its officers, directors, employees, agents, representatives, subsidiaries, and parent company CyberSource Corporation (collectively the "Indemnified Parties") from and against any loss, damages, claims, or expenses of any kind whatsoever, including court costs and attorney fees, incurred or sustained by Indemnified Parties due to the transfer of the Company data to its Authorized Vendor on Company's behalf and Authorized Vendor's negligence, fraud, misrepresentation, intentional acts, or omissions with respect to the data provided by Authorize.Net LLC to Authorized Vendor. In connection with the data requested hereunder, Company hereby represents and warrants that Company has entered into a valid and enforceable written agreement with Authorized Vendor and that such agreement requires Authorized Vendor to comply with all applicable international, federal, state, local laws and ordinances now or hereafter enacted, including data protection and privacy laws governing physical security of cardholder data.

Signature:	Name/Title:	Date:
_____	_____	_____