



Business Partner Payment Election Form

Purpose for processing form New authorization Edit business information Edit banking information

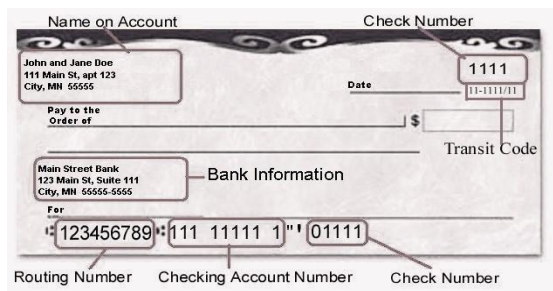
Section 1 General Business Information

| | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| Legal name (must match name on bank account) | Partner ID or log-in |
| DBA business name | Social Security number |
| Constant Contact partner name | or Company tax ID |
| Address (number, street and/or apt. no.) | City, state, and ZIP |
| Please check the description of your business: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company, Enter the tax classification (D=disregarded entity, C=corporation, P=Partnership) ▶ _____ <input type="checkbox"/> Other | |

Section 2 Electronic Payment Options

Please choose **one** of the following methods:

| | |
|----------------------------------------------------------------------------------------------------|----------------------------------------|
| <input type="checkbox"/> Direct Deposit | <input type="checkbox"/> PayPal |
| Name of the financial institution | PayPal Email Address |
| Classification of bank account: <input type="checkbox"/> Checking <input type="checkbox"/> Savings | (Additional lines if needed) |
| Routing number | Account number |



Section 3 Authorization & Certification

Under penalties of perjury, I hereby 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 one of the following (a) a U.S. resident, (b) a partnership, corporation, company or association created or organized in the United States or under the laws of the United States, (c) an estate (other than a foreign estate), or (d) a domestic trust

I, the undersigned do hereby authorize Constant Contact, Inc. to perform electronic transfers of my revenue share payments to the bank account listed under Section 2.

| | | |
|---------------------------|--------------------------|------|
| Signature Required | Signature of U.S. person | Date |
|---------------------------|--------------------------|------|

Please remit to one of the following:
 Fax: 781-370-8537
 Mail: Constant Contact Inc. 1601 Trapelo Road Waltham Ma. 02451
 Questions: Please call 781-472-6212