

**ADDENDUM TO THE FLEET FUEL CARD SERVICES AGREEMENT BETWEEN
WEX BANK ("WEX") AND SOURCEWELL CONTRACT #080620-WEX FOR THE STATE OF MISSOURI
UNDER CONTRACT # CC211293001**

CREDIT INFORMATION

Participating Entity has requested a credit account pursuant to the Sourcewell Contract #080620-WEX (the "Agreement"), entered into between the Sourcewell and WEX Bank ("WEX") as adopted by the State of Missouri through the execution of Missouri Contract # CC211293001. By enrolling in this Program, the Participating Entity named below agrees that in the event their account is not paid as agreed, WEX may report the undersigned's liability for and the status of the account to credit bureaus and others who may lawfully receive such information.

Participating Entity		Phone #	Fax#	
Headquarters Name and Physical Address (Do not include PO Box)				
Sourcewell Member ID Number		Applicant's Taxpayer ID # (TIN, FEIN or SSN)		
Non-Profit Only: SIC/Industry Code (e.g. 8399 Social Services; 6732 Education, Charitable Trusts; Other)		If Participating Entity is a Non-Profit Provide Gross Annual Revenue		
In Business Since (yyyy)	Year of Incorporation (yyyy)	Number of Vehicles	Avg Monthly Fuel Expenditures \$	Avg Monthly Service Expenditures \$

ACCOUNT SETUP INFORMATION

Write Participating Entity name as you wish it to appear on cards. Limit of 20 characters & spaces. Unless specified, no company name will appear on cards.

Billing Contact	Billing Address	City	State	Zip+4
Designate the Fleet Contact authorized to receive all charge cards, reports, and other such information we provide from time to time and to take actions with respect to your account and account access. This is also the person designated by your company to provide all fleet vehicles, driver and other information we may request.				
Authorized Fleet Contact Name	Title	Phone #	Fax #	
Mailing Address (if different from billing address)		City	State	Zip+4
Email address (required to take advantage of product type card controls)				
<input type="checkbox"/> Check here if business is exempt from motor fuels tax				

TERMS

1. This Addendum is to allow the Participating Entity to participate under the Agreement #080620-WEX between WEX and Sourcewell as adopted by the State of Missouri through the execution of Missouri Contract #CC211293001. It does not modify, amend or change the Agreement #080620-WEX or Missouri Contract #CC211293001 in any way.
2. Participating Entity hereby requests the services of WEX described in the Agreement #080620-WEX as adopted by the State of Missouri through the execution of Missouri Contract # CC211293001, and agrees to perform all duties required under the Agreement #080620-WEX and Missouri Contract # CC211293001, including, without limitation, timely payment of all charges (including any additional fees) on its account(s). Participating Entity agrees to be bound by the terms and conditions of the Agreement #080620-WEX as adopted by the State of Missouri through the execution of Missouri Contract # CC211293001, including, without limitation, rules for authorized and unauthorized use of cards, disputes of charges, reporting lost and stolen cards, and all other rules and provisions relating to use of Participating Entity's account.
3. Participating Entity acknowledges that its failure to make timely payment in accordance with the terms of the Agreement #080620-WEX and Missouri Contract #CC211293001 may result in suspension or cancellation of the account(s).
4. WEX Bank shall pay financial incentives in accordance with the terms and conditions set forth in the Agreement #080620-WEX between WEX and Sourcewell and Missouri Contract #CC211293001.

INFORMATION SHARING DISCLOSURE: Information regarding your transactions may be provided to Sourcewell accepting merchants or their service providers.

Compliance with Federal Law: WEX Bank complies with federal law which requires all financial institutions to obtain, verify, and record information that identifies each company or person who opens an account. What this means for you: when you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents for your business.

DISCLAIMER: THIS IS AN APPLICATION FOR SERVICES AND SHALL NOT BE BINDING UPON WEX UNTIL FINAL CREDIT APPROVAL HAS BEEN GRANTED BY WEX.

PARTICIPATING ENTITY AUTHORIZED SIGNATURE REQUIRED

Any person signing on behalf of the Participating Entity has been duly authorized by all necessary action of Participating Entity's governing body, and that the undersigned is authorized to make this application and accept the terms referenced herein on behalf of the Participating Entity.

Signature: _____	Print Name: _____
Title: _____	Date: _____

Complete and sign addendum. Email to: governmentmailbox@wexinc.com OR Fax to 1-866-527-8873

FOR OFFICE USE ONLY	Oppty Number	Sales Code	Plastic Type	Coupon Code QM1	Account Number
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