

BANK OF AMERICA

Healthcare Omni-Channel

Integration & Certification Guide v1.0.3

April 2025

Contents

Revision History 3

Integration and Certification Process 4

 Integration Best Practices 4

 Payment Fusion Platform..... 4

 Tokens 4

 Callback URL’s 4

 Remote ID 5

 Reversal..... 5

 Transaction Timeout Handling..... 5

Certification Timeline..... 6

 Card Not Present..... 6

 Hosted Payment Page 6

 Card Present..... 6

 Terminal Integration 6

 Development Process 7

 Development Checklist 7

 Use of Production Cardholder Data 8

 Submission Requirements for API issue..... 8

 Pre-certification and Validation 9

 Certification Process 9

 Test Script..... 9

Healthcare Industry Receipt Requirements..... 10

 Healthcare - Card Present – Cardholder/Merchant template 11

 Receipt Examples 13

 Healthcare - Hosted Payment Page / Electronic Commerce Receipt Requirements..... 17

Retail/Restaurant Industry - Receipt Requirements..... 19

 1) Retail/Restaurant - Card Present Receipt Requirements – Cardholder/Merchant template ... 19

 Receipt Samples 21

 2) Retail/Restaurant Hosted - Payment Page / Electronic Commerce Receipt Requirements 25

 Healthcare - ACH - Hosted Payment Page - Electronic Commerce Receipt Requirements 27

 Retail/Restaurant - ACH - Hosted Payment Page - Electronic Commerce Receipt Requirements 29

LEGAL NOTICE & DISCLAIMER: Bank of America considers the information contained in this document, including any attachments, to be confidential and may consist of intellectual property that belongs to Bank of America or others. All such information contained herein is provided to recipients on the basis of that understanding and is subject to confidentiality and other provisions of any written agreement between Bank of America and a recipient. You acknowledge and agree to strictly maintain the confidentiality of all information related to this document and agree to take reasonable precautions to maintain such confidentiality so that you do not divulge data to any third party without Bank of America's express written consent. This document is intended only for informational purposes. Information contained in this document, including links to any information that may be made available by third parties, is subject to change after the date on which this document is provided to a recipient.

Revision History

Version	Date	Description	Section	Author
1.03	4/30/2025	<ul style="list-style-type: none"> Added receipt requirements and templates for Healthcare and Retail/Restaurant HPP ACH transactions. 		
1.0.2	10/31/2024	<ul style="list-style-type: none"> Added certification timeline. Added a feature for Remote ID field that allows that field to be utilized for end-to-end reconciliation purposes between the Payment Fusion Gateway and the Fiserv reporting platform. 		
1.0.1	10/1/2023	<ul style="list-style-type: none"> Added a language not to use Production PAN in the development and testing environments. Made printing “duplicate” on a reprinted receipt an optional requirement. Made displaying “demo” on the terminal when it is used in demo mode an optional requirement. 		
1.0.0	12/2/2022	Initial Draft		Connect Team

Integration and Certification Process

This document provides information about the integration best practices, the API development, the certification process, and the receipt requirements.

Integration Best Practices

Payment Fusion Platform

The Payment Fusion architecture consists of 3 main software components as listed below, along with their version number:

- 1) Transaction Broker v3.0.0
The transaction broker is the central system for managing ongoing transactions, dispatching them to the terminals, providing results and keeping the mappings for all the terminals endpoints.
- 2) Settings API v1.0.0
The Setting API is used to:
 - a) Fetch the Terminal serial number and Source grouping for card present transaction processing.
 - b) Get a list the HPP payment forms available in your organization.
- 3) Reporting API v1.0.0
The reporting API is used to retrieve detailed reports on your payments (transactions and batches) that have been initiated through your Terminal or Hosted Payment Page (HPP). We recommend that you use the reporting API to help reconcile against your own records for auditing purposes.

Tokens

We recommend using our tokenization feature to store credit card information. This is particularly useful for a few reasons:

- You do not have to handle or store credit card information which allows you to not have to be PCI certified.
- Using tokens will help with making recurring and future payments easier for the ISV and the consumer.

Callback URL's

When submitting a transaction request, we recommend that you use one of the 3 callback URLs that are available to you. These are useful in a number of cases:

- Credit Card transactions
 - Send transaction data back to your URL for record keeping in which you do not have to use a polling method for finding transaction data.
 - Useful if there is a transition error or drop in connections while a transaction is being processed. This will give you a response back to let you know if the transaction was successful during the interruption.
- ACH transaction
This allows to receive updates for up to 60 days if there is for example a reversal on the transaction at the bank.

Remote ID

We recommend using this field for easier reconciliation between your Payment Application and the Healthcare Omni-Channel Gateway:

- It is used for keeping track of a 3rd party identifier alongside the transaction object. It is typically used by the ISV to assign its own identifier to the transaction for easy matching in case any network issues appear; it is not validated for uniqueness.
- You can use the remote ID to look up transactions as well through the Reporting API.
- For merchants processing on Fiserv platform, the following apply:
 - If the Remote ID is sent by the integrating application, it is mapped to the Order Number Field under Common Group in the Fiserv Specification.
 - The Order Number field in the Fiserv Specification does not support the potential length of the Transaction Broker Remote ID field (100 characters), so it is truncated if the integrating application is creating very long Remote ID.
 - Truncation will proceed from left-to-right to the **15 characters**, so the uniqueness of the Remote ID is preserved.
 - It can be used for end-to-end reconciliation purposes between the Payment Fusion Gateway reporting and the Fiserv reporting (ClientLine Enterprise) reporting to measure consistency and gaps.

Reversal

It is recommended that you use the reversal endpoint when submitting a Void or Refund transaction for credit cards. This endpoint will do all the heavy lifting for you in determining if the transaction is a void or a refund. This way you do not have to figure out if the batch has been settled or not.

Transaction Timeout Handling

We suggest a payment attempt request that did not get a response back is handled as follow to avoid a duplicate transaction or double charging the cardholder.

a) Using a Callback URL

- Inform the cardholder there is a processing issue and request another method of payment, i.e. cash.
- Once the communication issue is resolved, check the callback URL queue to see if the timeout transaction exists.
- If the transaction is found, send a Reversal to void the transaction.

b) Using Polling

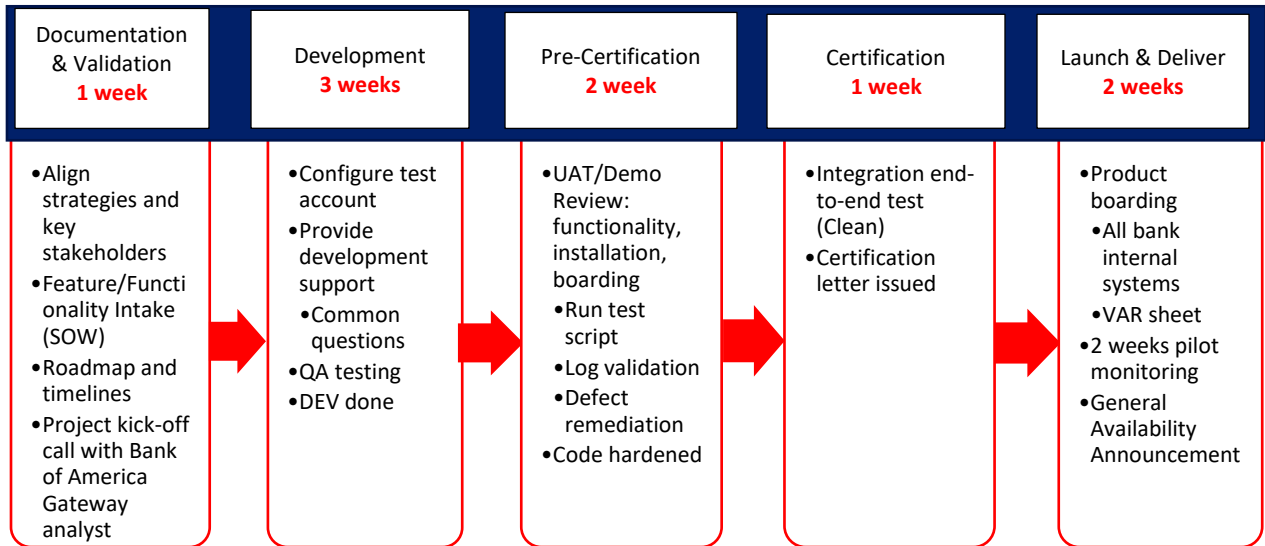
- Inform the cardholder there is a processing issue and request another method of payment, i.e. cash.
- Once the communication issue is resolved, poll the timeout transaction using the “Read Transaction” with the “remote_id” from the Create Transaction request.
- If the transaction is found, send a Reversal to void the transaction.

Certification Timeline

The following section contains diagrams explaining the integration timeline for each integration type that Bank of America supports. Code development and defect remediation timelines for both Card Present and Card not Present are estimated and may be adjusted.

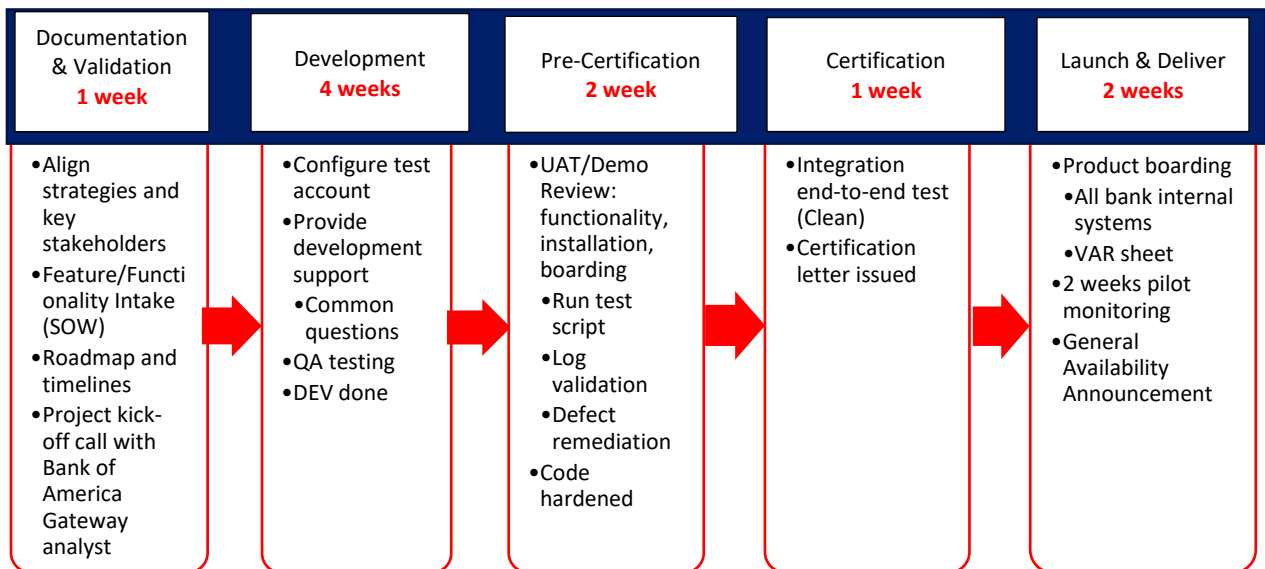
Card Not Present

Hosted Payment Page



Card Present

Terminal Integration



Development Process

The Certification Engineer provides development support by answering questions and assisting with unit testing. The partner submits integration issues to their assigned Solution/Certification Engineer through emails.

Development Checklist

This section outlines the steps needed for an Independent Software Vendor (ISV) to complete before being assigned a Certification Analyst.

- Confirm the development is at least 100% complete, the ISV partner to provide their development status.
 - If Development is less than 100% complete, Bank of America will not begin the certification process.
 - Tested all applicable transaction types per the Development test script:
 - Sale (Auth + Capture)
 - Pre-Auth
 - Capture (Post-Auth)
 - Refund
 - Void
 - Reversal
 - Credit
 - Tip Adjust
 - Inline Tipping
 - Tested all industry types in scope:
 - Retail
 - Restaurant/Quick Service Restaurant (QSR)
 - Personal Services
 - Professional Services
 - Healthcare
 - Ecommerce/MOTO
 - Tested all applicable ancillary features and functionality based on the agreed upon project scope. Refer to Technical Scope Assessment.
- Confirm implementation of the Bank of America Gateway Integration Developer Guide's Receipt requirements:

Off-Site Gateway

- Receipt Requirement:
 - Produce an actual or a mock-up receipt that displays all the payment transaction information as outlined in the Developer Guide, no product or service description related information is required to be printed on the receipt.

Hybrid Gateway

- Receipt Requirement:
 - Provide a sample of the payload returned to a payment application needed to generate a receipt and any additional receipt configuration information provided to the merchant or the ISV partner.

- Produce a mock-up receipt that displays all receipt requirements as outlined in the Developer Guide.

On-site Gateway

- Receipt Requirement:
 - Provide full receipt samples as outlined in the Developer Guide.
- If Receipt development is not complete, Bank of America will not begin the certification process.
- Verify decline receipts are printing as part of negative testing.
- Confirm implementation of the Bank of America Gateway Integration Developer Guide’s Merchant Solution Configuration Number (MSCN) requirements:
 - If MSCN is not complete, Bank of America will not begin the certification process.
 - Validate MSCN value is being transmitted in the transaction request to the Host as part of the certification test script.
- Confirm API Payload logs are available for certification including the below details:
 - Services and endpoint that are being called.
 - Content Body
 - Complete set of request headers
 - Full response being received.
 - Response headers including correlation.
- Confirm merchant plug-in integration with Fraud Management. FME is a required feature for all E-commerce /Card Not Present (CNP) Native Solutions.
 - Device fingerprinting – Fraud Management supports end point device data collection for the purpose of device ID generation by Threatmetrix. All ISV partners are required to implement the Threatmetrix SDK to enable this functionality as part of their Fraud Management integration.
 - IF the bank’s FME integration is not coded to and tested: A certification letter will not be issued.

Use of Production Cardholder Data

Production cardholder data (primary account number - PAN) should not be used for the development, the testing, or the certification. The use of production data in the development or the testing environments provides malicious individuals with the opportunity to gain unauthorized access to live cardholder data. If realistic PANs are needed to test a system functionality, payment card brands or other suppliers can often provide appropriate account numbers for this purpose.

Submission Requirements for API issue

Description of the issue:

- a. What are you experiencing.
- b. Source ID
- c. Original JSON post that was posted to the server.
- d. Error JSON that was received in your application.
- e. The API URL that was used.

Pre-certification and Validation

Once the development is completed, the Certification Engineer will schedule a “smoke testing” session with the partner to validate the overall readiness of the code development to move to the certification phase. The “smoke testing” consists of running transactions for some of the features and functionalities the partner will be certifying. (transaction types, reporting, receipt etc.)

Certification Process

Test Script

A test plan is provided, it encompasses the features and functionalities the partner is integrating.

Executing the test script

- Certification testing will be administered by the certification analyst.
- The partner will execute the test plan to validate the integration.
- Results will be reported in the test plan and published to the partner.
 - If no issues are found, the approved executed test plan is deemed certified.
 - If issues are found, the partner will address the issue(s) and another test script run will be scheduled to validate the changes.
- The test plan document is used to verify the integration and will be updated with screenshots of the partner’s product for use by other teams within the Bank.
- The partner provides the receipts and any transaction log(s) resulting from the test script run for validation.
- The partner may be asked to provide a video demo of the certified solution as well as detailed instructions required to provision an account on the partner side.

Healthcare Industry Receipt Requirements

This table outlines the data elements that should be printed on receipts for the healthcare industry, the information should be limited to the payment information. No Protected Health information (PHI) or Personal Identifying Information (PII) such as the actual treatment received by the patient, the date of service, a numerical or a verbal description of the service rendered should be included on the payment receipt. The layout of the receipt can be customized to the merchant current receipt template.

Healthcare - Card Present – Cardholder/Merchant template

Card Present Receipt Requirements	Cardholder	Merchant
Merchant DBA Name The merchant’s name as disclosed to the cardholder at the Point of interaction (POI) and on the transaction receipt must be the same as what is provided in authorization and clearing transaction messages	X	X
Merchant DBA Location Street address, City, State, Country if applicable (must match what is sent in clearing file)	X	X
Transaction Date and Time	X	X
Merchant DBA Telephone Number	X	X
Gateway Reference Number (PN Ref) Processor or gateway transaction reference number	X	X
Remote ID Used by the ISV to assign its own identifier to a transaction	X	X
Truncated Card Number Last 4 digits of the PAN	X	X
Transaction Amount Price of goods and services including taxes, fees, gratuity and any card discounts that may have been applied	X	X
Transaction Currency Currency symbol	X	X
Transaction Fee (Conditional – Printed on a separate line and added to the total amount, example: Convenience Fee, Service Fee, Surcharge)	X	X
Tax Amount (Conditional – Printed on a separate line and added to the total amount)	X	X
Authorization Code	X	X
Transaction Type Example - Sale, Refund, Reversal etc.	X	X
Card Network Name Visa, MasterCard, American Express, Discover, JCB etc.	X	X
Card Entry Mode Contact/Chip, Contactless, Fallback, Swipe, Keyed, Process	X	X
Preauthorized Healthcare (For a Healthcare Auto-Substantiation Transaction, the words “Preauthorized Healthcare”)	X	X
Cardholder signature line or space for cardholder signature Customer receipt may be printed or sent electronically This applies only to a transaction that requires signature <ul style="list-style-type: none"> • A signature may be captured electronically • The transaction occurs in face-to-face environment • The transaction is not a Visa Easy Payment Services (VEPS) • A PIN is not used for verify the cardholder 		X

Card Present Receipt Requirements			Cardholder	Merchant
EMV Tag Data				
Tag	Name	Description		
9F12	Application Name (labelled on the receipt as Card Network Name)	Application Preferred Name if present on the card in character set supported by the printer, otherwise Application Label (Tag 50) should be printed	X	X
4F	AID	Application Identifier		
95	TVR	Terminal Verification Results		
9B	TSI	Transaction Status Indicator		
8A	ARC	Authorization Response Code		
PIN Statement (only required for EMV PIN) e.g., PIN Verified, PIN Locked			X	X
Cardholder's Name as it appears on the card, if present			X	X
Response Literal Message (Approve, Decline)			X	X
Credit Disclaimer (optional for cardholder copy) I agree to pay the total above amount according to card issuer agreement				X
Receipt Identifier (Cardholder copy, Merchant Copy)			X	X
Reprinted Receipt (optional) Indicates "Reprint" or "Duplicate"			X	X
Demo Mode (optional) Indicates "DEMO" if transaction is ran in demo mode			X	X

Receipt Examples

Healthcare - Approved Signature EMV Contact online transaction

Merchant Name	
Merchant Street	
City, State, Zip	
Phone	
MM/DD/YYYY	HH:MM:SS
Transaction Type	Sale
Card Network	Visa
Card Number	XXXXXXXXXX1234
Entry Mode	Chip
Transaction Amount	\$90.51
Total:	\$90.51
Remote ID: XXXXXX	
Approval Code: XXXXXX	
PN Ref: XXXXXXXXX	
APP Name: XXXXXXXX	
AID: XXXXXXXXXXXXX	
TVR: XXXXXXXX	
TSI: XXXX	
ARC: XX	
APPROVED BY ISSUER	
I agree to pay above total amount according to card issuer agreement	
X _____	
Cardholder Signature	
Merchant Copy	

Merchant Name	
Merchant Street	
City, State, Zip	
Phone	
MM/DD/YYYY	HH:MM:SS
Transaction Type	Sale
Card Network	Visa
Card Number	XXXXXXXXXX1234
Entry Mode	Chip
Transaction Amount	\$90.51
Total:	\$90.51
Remote ID: XXXXXXXX	
Approval Code: XXXXXXXX	
PN Ref: XXXXXXXXXX	
APP Name: XXXXXXXX	
AID: XXXXXXXXXXXXX	
TVR: XXXXXXXX	
TSI: XXXX	
ARC: XX	
APPROVED BY ISSUER	
I agree to pay above total amount according to card issuer agreement	
Customer Copy	

Healthcare - EMV Contact Credit Transaction – Denied online

For EMV declined transactions, all the EMV tags that were submitted in the transaction **can** be printed on the receipt for troubleshooting purposes.

Merchant Name	
Merchant Street	
City, State, Zip	
Phone	
MM/DD/YYYY	HH:MM:SS
Transaction Type	Sale
Card Network	Visa
Card Number	XXXXXXXXXX1234
Entry Mode	Chip
Transaction Amount	\$90.51
Total:	\$90.51
Remote ID: XXXXXXXX	
PN Ref: XXXXXXXXXXXX	
APP Name: XXXXXXXX	
AID: XXXXXXXXXXXXX	
TVR: XXXXXXXX	
TSI: XXXX	
ARC: XX	
DENIED BY ISSUER	
Cardholder Verified by PIN	
Merchant Copy	

Merchant Name	
Merchant Street	
City, State, Zip	
Phone	
MM/DD/YYYY	HH:MM:SS
Transaction Type	Sale
Card Network	Visa
Card Number	XXXXXXXXXX1234
Entry Mode	Chip
Transaction Amount	\$90.51
Total:	\$90.51
Remote ID: XXXXXXXX	
PN Ref: XXXXXXXXXXXX	
APP Name: XXXXXXXX	
AID: XXXXXXXXXXXXX	
TVR: XXXXXXXX	
TSI: XXXX	
ARC: XX	
DENIED BY ISSUER	
Cardholder Verified by PIN	
Customer Copy	

Healthcare - Approved Magstripe Swiped online transaction

Merchant Name	
Merchant Street	
City, State, Zip	
Phone	
MM/DD/YYYY	HH:MM:SS
Transaction Type	Sale
Card Network	Visa
Card Number	XXXXXXXXXX1234
Entry Mode	Swipe
Transaction Amount	\$90.51

Total:	\$90.51
Remote ID: XXXXXX	
Approval Code: XXXXXX	
PN Ref: XXXXXXXXX	
APPROVED BY ISSUER	
I agree to pay above total amount according to card issuer agreement	
X _____	
Cardholder Signature	
Merchant Copy	

Merchant Name	
Merchant Street	
City, State, Zip	
Phone	
MM/DD/YYYY	HH:MM:SS
Transaction Type	Sale
Card Network	Visa
Card Number	XXXXXXXX1234
Entry Mode	Swipe
Transaction Amount	\$90.51

Total:	\$90.51
Remote ID: XXXXXX	
Approval Code: XXXXXX	
PN Ref: XXXXXXXXX	
APPROVED BY ISSUER	
I agree to pay above total amount according to card issuer agreement	
Customer Copy	

Healthcare - Approved Magstripe Keyed online transaction

Merchant Name	
Merchant Street	
City, State, Zip	
Phone	
MM/DD/YYYY	HH:MM:SS
Transaction Type	Sale
Card Network	Visa
Card Number	XXXXXXXXXX1234
Entry Mode	keyed
Transaction Amount	\$90.51

Total:	\$90.51
Remote ID: XXXXXX	
Approval Code: XXXXXX	
PN Ref: XXXXXXXXX	
APPROVED BY ISSUER	
I agree to pay above total amount according to card issuer agreement	
X _____	
Cardholder Signature	
Merchant Copy	

Merchant Name	
Merchant Street	
City, State, Zip	
Phone	
MM/DD/YYYY	HH:MM:SS
Transaction Type	Sale
Card Network	Visa
Card Number	XXXXXXXXXX1234
Entry Mode	Keyed
Transaction Amount	\$90.51

Total:	\$90.51
Remote ID: XXXXXXXX	
Approval Code: XXXXXXXX	
PN Ref: XXXXXXXXXX	
APPROVED BY ISSUER	
I agree to pay above total amount according to card issuer agreement	
Customer Copy	

Healthcare - Hosted Payment Page / Electronic Commerce Receipt Requirements

Card Not Present Receipt Requirements	Cardholder	Merchant
Merchant DBA Name The merchant's name as disclosed to the cardholder at the Point of interaction (POI) and on the transaction receipt must be the same as what is provided in authorization and clearing transaction messages	X	X
Merchant DBA Location Street address, City, State, Country if applicable (must match what is sent in clearing file)	X	X
Merchant DBA Telephone Number	X	
Merchant URL (Internet Address)	X	X
Transaction Date and Time	X	X
Transaction Amount Price of goods or services including taxes and any card discount	X	X
Transaction Currency Currency symbol	X	X
Authorization Code	X	X
Gateway Reference Number (PN Ref) Processor or gateway transaction reference number	X	X
Remote ID Used by the ISV to assign its own identifier to a transaction		
Card Network Name (Example: Visa, MC, Amex, Discover etc.)	X	X
Truncated Account Number Last 4 digit of the PAN	X	X
Transaction Type (Example: Sale, Refund)	X	X
Tip Amount (Conditional – Printed on a separate line and added to the total amount)		
Transaction Fee (Conditional – Printed on a separate line and added to the total amount, example: Convenience Fee, Service Fee, Surcharge)	X	X

MERCHANT INFORMATION
Merchant DBA Merchant Street Address Merchant City State zip Merchant Phone Number
PAYMENT INFORMATION
Date/Time: MM-DD-YYYY 12 :00 :00 Transaction Amount: \$1.00 Transaction Type: Sale Card Network: Visa Account Number (Last 4 digits): XXXXXXXXXXX1234 Authorization Code: XXXXXXXX Remote ID: XXXXXXXX Gateway Reference Number (PN Ref): XXXXXXXX

Retail/Restaurant Industry - Receipt Requirements

The following table outlines the receipt requirements for Retail/Restaurant. The layout of the receipt can be customized to the merchant current receipt template.

1) Retail/Restaurant - Card Present Receipt Requirements – Cardholder/Merchant template

Card Present Receipt Requirements	Cardholder	Merchant
Merchant DBA Name The merchant’s name and country location, as disclosed to the cardholder at the Point of interaction (POI) and on the transaction receipt must be the same as what is provided in authorization and clearing transaction messages	X	X
Merchant DBA Location Street address, City, State, Country if applicable (must match what is sent in clearing file)	X	X
Transaction Date and Time	X	X
Merchant DBA Telephone Number	X	X
Gateway Reference Number (PN Ref) Processor or gateway transaction reference number	X	X
Remote ID Used by the ISV to assign its own identifier to a transaction		
General description of goods or services	X	X
Truncated Card Number Last 4 digits of the PAN	X	X
Transaction Amount Price of goods and services including taxes and any card discounts that may have been applied	X	X
Transaction Currency Currency symbol	X	X
Transaction Fee (Conditional – Printed on a separate line and added to the total amount, example: Convenience Fee, Service Fee, Surcharge)	X	X
Tax Amount (Conditional – Printed on a separate line and added to the total amount)	X	X
Authorization Code	X	X
Transaction Type Sale, Refund, Reversal etc.	X	X
Card Network Name Visa, MasterCard, American Express, Discover, JCB etc.	X	X
Card Entry Mode Contact/Chip, Contactless, Fallback, Swipe, Keyed, Process	X	X
Cardholder signature line or space for cardholder signature Customer receipt may be printed or sent electronically This applies only to a transaction that requires signature <ul style="list-style-type: none"> A signature may be captured electronically 		X

Card Present Receipt Requirements			Cardholder	Merchant
<ul style="list-style-type: none"> The transaction occurs in face-to-face environment The transaction is not a Visa Easy Payment Services (VEPS) A PIN is not used for verifying the cardholder 				
EMV Tag Data				
Tag	Name	Description		
9F12	Application Name (labelled on the receipt as Card Network Name)	Application Preferred Name if present on the card in character set supported by the printer, otherwise Application Label (Tag 50) should be printed	X	X
4F	AID	Application Identifier		
95	TVR	Terminal Verification Results		
9B	TSI	Transaction Status Indicator		
8A	ARC	Authorization Response Code		
PIN Statement (only required for EMV PIN) e.g. PIN Verified, PIN Locked			X	X
Cardholder Name If present on the card - Printed below the signature line			X	X
Response Literal Message (Approve, Decline)			X	X
Item Description Product or service purchased			X	X
Credit Disclaimer (optional for cardholder copy) I agree to pay the total above amount according to card issuer agreement				X
Return Policy (Applicable if merchant restricts the return of goods or cancelation of services) Must be displayed in close proximity to the cardholder signature line)			X	X
Receipt Identifier (Cardholder copy, Merchant Copy)			X	X
Reprinted Receipt (optional) Indicates "Reprint" or "Duplicate"			X	X
Demo Mode (optional) Indicates "DEMO" if transaction is ran in demo mode			X	X

Receipt Samples

Approved Signature EMV Contact online transaction

Merchant Name	
Merchant Street	
City, State, Zip	
Phone	
MM/DD/YYYY	HH:MM:SS
Transaction Type	Sale
Card Network	Visa Credit
Card Number	XXXXXXXXXX1234
Entry Mode	Chip
Your item description	\$90.51
Amount:	\$90.51
Tip:	\$10.00

Total:	\$100.51
Remote ID: XXXXXXX	
Approval Code: XXXXXX	
PN Ref: XXXXXXXXX	
APP Name: XXXXXX	
AID: XXXXXXXXXXXXX	
TVR: XXXXXXXXX	
TSI: XXXX	
ARC: XX	
APPROVED BY ISSUER	
I agree to pay above total amount according to card issuer agreement	
X _____	
<Cardholder Name>	
Merchant Copy	

Merchant Name	
Merchant Street	
City, State, Zip	
Phone	
MM/DD/YYYY	HH:MM:SS
Transaction Type	Sale
Card Network	Visa Credit
Card Number	XXXXXXXXXX1234
Entry Mode	Chip
Your item description	\$90.51
Amount:	\$90.51
Tip:	\$10.00

Total:	\$100.51
Remote ID: XXXXXXX	
Approval Code: XXXXXX	
PN Ref: XXXXXXXXX	
APP Name: XXXXXXXX	
AID: XXXXXXXXXXXXX	
TVR: XXXXXXXXX	
TSI: XXXX	
ARC: XX	
APPROVED BY ISSUER	
I agree to pay above total amount according to card issuer agreement	
Customer Copy	

Retail/Restaurant - EMV Contact Credit Transaction – Denied online

For EMV declined transactions, all the EMV tags that were submitted in the transaction **can** be printed on the receipt for troubleshooting purposes.

Merchant Name	
Merchant Street	
City, State, Zip	
Phone	
MM/DD/YYYY	HH:MM:SS
Transaction Type	Sale
Card Network	Visa Credit
Card Number	XXXXXXXXXX1234
Entry Mode	Chip
Your item description	\$90.51
Subtotal:	\$90.51
Tip:	\$10.00
Total:	\$100.51
Remote ID: XXXXXXXX	
PN Ref: XXXXXXXXXXXX	
APP Name: XXXXXXXX	
AID: XXXXXXXXXXXXX	
TVR: XXXXXXXX	
TSI: XXXX	
ARC: XX	
DECLINED BY ISSUER	
Cardholder Verified by PIN	
Merchant Copy	

Merchant Name	
Merchant Street	
City, State, Zip	
Phone	
MM/DD/YYYY	HH:MM:SS
Transaction Type	Sale
Card Network	Visa Credit
Card Number	XXXXXXXXXX1234
Entry Mode	Chip
Your item description	\$90.51
Subtotal:	\$90.51
Tip:	\$10.00
Total:	\$100.51
Remote ID: XXXXXXXX	
PN Ref: XXXXXXXXXXXX	
APP Name: XXXXXXXX	
AID: XXXXXXXXXXXXX	
TVR: XXXXXXXX	
TSI: XXXX	
ARC: XX	
DECLINED BY ISSUER	
Cardholder Verified by PIN	
Customer Copy	

Retail/Restaurant Swipe Credit Transaction – Declined

Merchant Name	
Merchant Street	
City, State, Zip	
Phone	
MM/DD/YYYY	HH:MM:SS
Transaction Type	Sale
Card Network	Visa
Card Number	XXXXXXXXXX1234
Entry Mode	Swipe
Your item description	\$90.51
Subtotal:	\$90.51
Tip:	\$10.00

Total:	\$100.51
Remote ID: XXXXXXXX	
PN Ref: XXXXXXXXXXXX	
DECLINED	
Merchant Copy	

Merchant Name	
Merchant Street	
City, State, Zip	
Phone	
MM/DD/YYYY	HH:MM:SS
Transaction Type	Sale
Card Network	Visa
Card Number	XXXXXXXXXX1234
Entry Mode	Swipe
Your item description	\$90.51
Subtotal:	\$90.51
Tip:	\$10.00

Total:	\$100.51
Remote ID: XXXXXXXX	
PN Ref: XXXXXXXXXXXX	
DECLINED	
Customer Copy	

Retail/Restaurant - Approved swipe transaction

Merchant Name	
Merchant Street	
City, State, Zip	
Phone	
MM/DD/YYYY	HH:MM:SS
Transaction Type	Sale
Card Network	Visa
Card Number	XXXXXXXXXX1234
Entry Mode	Swipe
Your item description	\$90.51
Amount:	\$90.51
Tip:	\$10.00

Total:	\$100.51
Approval Code: XXXXXXXX	
PN Ref: XXXXXXXXXXXX	
Remote ID: XXXXXXXX	
APPROVED	
I agree to pay above total amount according to card issuer agreement	
X _____ <Cardholder Name>	
Merchant Copy	

Merchant Name	
Merchant Street	
City, State, Zip	
Phone	
MM/DD/YYYY	HH:MM:SS
Transaction Type	Sale
Card Network	Visa
Card Number	XXXXXXXXXX1234
Entry Mode	Swipe
Your item description	\$90.51
Amount:	\$90.51
Tip:	\$10.00

Total:	\$100.51
Approval Code: XXXXXXXX	
PN Ref: XXXXXXXXXXXX	
Remote ID: XXXXXXXX	
APPROVED	
I agree to pay above total amount according to card issuer agreement	
Customer Copy	

2) Retail/Restaurant Hosted - Payment Page / Electronic Commerce Receipt Requirements

The following table outlines the receipt requirements for card not present transactions. The information can be printed in any order

Card Not Present Receipt Requirements	Cardholder	Merchant
Merchant DBA (the name used by the merchant to identify itself to its customers)	X	X
Merchant DBA Location Street Address, City, State, Zip	X	X
Merchant Phone Number		
Merchant URL (Internet Address)	X	X
Transaction Date and Time	X	X
General description of goods or services	X	X
Transaction Amount Price of goods and services including taxes and any card discount	X	X
Transaction Currency Currency symbol	X	X
Authorization Code	X	X
Gateway Reference Number (PN Ref) Processor or gateway transaction reference number	X	X
Remote ID Used by the ISV to assign its own identifier to a transaction		
Network Name (Visa, MC, Amex, Discover etc.)	X	X
Last 4 digit of the PAN	X	X
Transaction Type Sale or Refund etc.	X	X
Payment Type Credit, Debit, ACH	X	X
Ship to address (if shipped)	X	X
Item Description Product or service purchased	X	X
Shipping Method	X	X
Fee Assessed (if any) Convenience or Service Fees must be shown separate and clearly on the receipt	X	X
Cancellation policy if restricted Can be communicated on the merchant's website and provide a way for the cardholder to acknowledge the policy during the checkout process or sent in a supplemental email with the receipt	X	
Return/Refund Policy if restricted Can be communicated on the merchant's website and provide a way for the cardholder to acknowledge the policy during the checkout process or sent in a supplemental email with the receipt	X	

Retail/Restaurant - Hosted Payment Page Receipt Sample

Merchant DBA	Your company Logo (Optional)		
Merchant Street Address			
Merchant City State zip			
Merchant Phone Number			
Merchant Email/Website			
SHIPPING INFORMATION (if shipped)			
Shipping Address:			
Client name			
Street address			
City, State, Zip			
ORDER # 123456789			
Description	Unit Cost	QTY	Amount
Your item description	\$0	1	\$0
Your item description	\$0	1	\$0
			Item(s) Subtotal: \$0
			Shipping & handling: \$0
			Fee: \$0
			Subtotal: \$0
			Discount: \$0
			Tax Rate: \$0
			Tax: \$0
			Grand Total: \$0
PAYMENT INFORMATION			
Date/Time: MM-DD-YYYY			
Payment Type: Credit, Debit, ACH			
Transaction Type: Sale, Refund, Reversal			
Card Network Name: Visa, MC, AMEX, Check			
Card Number (Last 4 PAN digits):			
XXXXXX1234			
Authorization Code: XXXXXXXX			
Remote ID: XXXXXXXX			
Gateway Reference Number (PN Ref) :			
XXXXXXX			
RETURN POLICY			
If you are not completely satisfied, you may exchange or return your purchase within 90 days.....			
Questions? 1800-800-8000 Onlinecustomerservice@yourstore.com			

Healthcare - ACH - Hosted Payment Page - Electronic Commerce Receipt Requirements

The following table outlines the receipt requirements for healthcare ACH transactions. The information can be printed in any order

Card Not Present Receipt Requirements	Cardholder	Merchant
Merchant DBA (the name used by the merchant to identify itself to its customers)	X	X
Merchant DBA Location Street Address, City, State, Zip	X	X
Merchant Phone Number (optional)		
Merchant email / URL (Internet Address)	X	X
Transaction Date and Time	X	X
Transaction Amount Price of goods and services including taxes and any card discount	X	X
Transaction Currency Currency symbol	X	X
Authorization Code	X	X
Gateway Reference Number (PN Ref) Processor or gateway transaction reference number	X	X
Remote ID (optional) Used by the ISV to assign its own identifier to a transaction		
Network Name (ACH)	X	X
Last 4 digit of the Check/Token	X	X
Transaction Type Sale or Refund etc.	X	X
Payment Type ACH – WEB/PPD/CCD/TEL/ARC	X	X
Ship to address (if shipped)		
Shipping Method (optional)		
Fee Assessed (if any) Convenience or Service Fees must be shown separate and clearly on the receipt	X	X
Cancellation policy if restricted Can be communicated on the merchant’s website and provide a way for the cardholder to acknowledge the policy during the checkout process or sent in a supplemental email with the receipt	X	

MERCHANT INFORMATION
Merchant DBA Merchant Street Address Merchant City State zip Merchant Phone Number Merchant Email/Website
PAYMENT INFORMATION
Date/Time: MM-DD-YYYY Payment Type : < ACH – WEB/PPD/CCD/TEL/ARC > Transaction Amount: \$1.00 Transaction Type: <Sale, Refund, Reversal> Card Network Name: <ACH> Last 4 Check #: 1234 Authorization Code: <XXXXXX> Gateway Reference Number (PN Ref): <XXXXXXXXXXXX> Remote ID: XXXXXX
Customer Notice
By presenting your check, you authorized an electronic debit from your account in the amount shown above.

Retail/Restaurant - ACH - Hosted Payment Page - Electronic Commerce Receipt Requirements

The following table outlines the receipt requirements for healthcare ACH transactions. The information can be printed in any order

Card Not Present Receipt Requirements	Cardholder	Merchant
Merchant DBA (the name used by the merchant to identify itself to its customers)	X	X
Merchant DBA Location Street Address, City, State, Zip	X	X
Merchant Phone Number (optional)		
Merchant email / URL (Internet Address)	X	X
Transaction Date and Time	X	X
Transaction Amount Price of goods and services including taxes and any card discount	X	X
Transaction Currency Currency symbol	X	X
Authorization Code	X	X
Gateway Reference Number (PN Ref) Processor or gateway transaction reference number	X	X
Remote ID (optional) Used by the ISV to assign its own identifier to a transaction		
Network Name (ACH)	X	X
Last 4 digit of the Check/Token	X	X
Transaction Type Sale or Refund etc.	X	X
Payment Type ACH – WEB/PPD/CCD/TEL/ARC	X	X
Ship to address (if shipped)		
Item Description Product or service purchased	X	X
Shipping Method (optional)		
Fee Assessed (if any) Convenience or Service Fees must be shown separate and clearly on the receipt	X	X
Cancellation policy if restricted Can be communicated on the merchant’s website and provide a way for the cardholder to acknowledge the policy during the checkout process or sent in a supplemental email with the receipt	X	

MERCHANT INFORMATION
Merchant DBA Merchant Street Address Merchant City State zip Merchant Phone Number Merchant Email/Website
PAYMENT INFORMATION
Date/Time: MM-DD-YYYY Payment Type : < ACH – WEB/PPD/CCD/TEL/ARC > Transaction Amount: \$1.00 Transaction Type: <Sale, Refund, Reversal> Card Network Name: <ACH> Last 4 Check #: 1234 Authorization Code: <XXXXXX> Gateway Reference Number (PN Ref): <XXXXXXXXXXXX> Remote ID: XXXXXX Item Description
Customer Notice
By presenting your check, you authorized an electronic debit from your account in the amount shown above.