



Exhibit 1

**SUB-AGENT CONSENT**

This SUB-AGENT CONSENT (this “**Consent**”) is being provided by the signatory below (the “**Sub-Agent**”) to and for the benefit of **Paysafe Payment Processing Solutions, LLC**, a Delaware limited liability company (the “**Company**”).

WHEREAS, reference is made to that certain Non-Registered ISO Agreement (the “**ISO Agreement**”) by and between the Company and \_\_\_\_\_,  
a \_\_\_\_\_ (“**ISO**”); and

WHEREAS, Sub-Agent desires to be engaged by ISO to assist ISO in soliciting prospective merchants to enter into merchant agreements with the Company, pursuant to which the Company will provide payment processing services to such merchants.

NOW THEREFORE, as a condition to the Company approving Sub-Agent under the terms of the ISO Agreement, Sub-Agent hereby acknowledges and agrees as follows:

1. ISO has made available to Sub-Agent a true and complete copy of the ISO Agreement, and Sub-Agent has read, understood and agrees to comply with and be bound by all of the ISO Agreement’s applicable terms and provisions; and
2. Sub-Agent hereby authorizes the Company, and any of its sponsor banks, to engage one or more third party consumer or other reporting agencies (each, a “**Background Check Vendor**”) to obtain a background check report on Sub-Agent, which background check may include information concerning Sub-Agent’s employment and earnings history, education, credit history, motor vehicle history, criminal history, military service, professional credentials and licenses. If any such report is obtained by the Company, the Company shall, upon the written request of Sub-Agent, provide to Sub-Agent the name of any such Background Check Vendor so that Sub-Agent may obtain the nature and substance of the information contained in such report; and
3. Sub-Agent acknowledges and agrees that the Company may reject or fail to approve Sub-Agent under the terms of the ISO Agreement, for any reason in Company’s sole and absolute discretion, with no liability to Sub-Agent.

ACKNOWLEDGED AND AGREED TO BY:

\_\_\_\_\_  
Signature of Sub-Agent

\_\_\_\_\_  
Social Security Number of Sub-Agent:

\_\_\_\_\_  
Printed Name of Sub-Agent

\_\_\_\_\_  
Email Address of Sub-Agent:

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone Number of Sub-Agent:

\_\_\_\_\_  
Address of Sub-Agent:

\_\_\_\_\_  
Driver’s License of Sub-Agent:

No. \_\_\_\_\_ State: \_\_\_\_\_