## **Account Set up Form**

Our payment terms are normally that full payment is to be received at our office within thirty days of the date of our invoice. If we do not receive payment within this timeframe, we assess interest at 1.5%.

If there are ever any questions concerning any charges on our invoices, please call us immediately. We realize that mistakes happen and we are happy to discuss any question you may have.

Specify below the correct Billing Information for us to use when mailing your invoices, and the person for us to contact if we have any questions regarding payments. Please also tell us if you require a specific reference number to appear on your invoices for payment purposes.

Billing Information	Contact Information
Company Name	AP Contact Name
Attention	Company Name
Address	Phone
	Fax
Reference	Email
Signature	Date
Print Name	Business Title

Report Submission	
Name of Recipient:	Email of Recipient:
User Name*:	Password:

<sup>\*</sup>User Name is the name used to log in for reports for your data.

Official Use only	
Account Number:	