Career Connections, Inc. 449 E. State Street, Athens OH 45701 Phone and FAX: 740-594-4941 e-mail: help@careerconnections.info FEIN: 31-1453191

Account Information

Billing Information									
Company or or organization name:			•			Website:			
Send bills to attention of:						Phone:			
Mailing address:						Email:			
City, State ZIP						County:			
My organization is sales tax exempt and I am attaching an exempt certificate. (An exemption certificate must be provided or we will have charge sales tax.)					n exemption will have to	BWC policy # (if known)			
I prefer to be invoiced: □ weekly or □ bi-weekly					I prefer to receive my	/ invoices by: □ USPS or □ e-mail			
Method of Payment (choose one)									
Bill my credit card (provide credit card information below and your signature at the bottom of the form)									
	□ MasterCard □ Visa □ American Express								
	Name as i	it appea	ars on card:						
	Billing address (if different from mailing address above):								
	Card Num	ber:				Exp. date:	CSV:		
Invoice me (provide the credit information requested below)									
	Credit References:								
	Bank name:								
Contact		ame:				Phone:			
	Other creditor name:								
	Contact na	ame:				Phone:			
Agreement of Understanding									
I,, an authoriz ed agent of									
[your name] [c ompany/organization name, if applicable] do hereby authorize Career Connections, Inc., to: contact the credit references listed above and request information about the age, average balance, credit line, and average payment history of the accounts, or bill my credit card for charges incurred. I understand that my credit card will be charged upon creation of the invoice and the invoice copy I receive will be marked as "paid." Furthermore, I acknowledge that Career Connections' terms are net ten (10) days and agree to pay such balances in a timely manner, and understand									
that amounts paid after such date may be subject to finance charges of 1½% per month until paid (18% per annum) as well as attorney's fees for collections, if necessary. Multiple unpaid invoices may result in a suspension of service. I have received and read Career Connections' Terms of Service Agreement and warrant that I understand and agree to the policies outlined therein.									
Signature:						T			
Title:						Date:			
Additional Information									
Can you tell us how you were referred to Career Connections?									
	tions to locati								
	ng instruction								
Other important information:									