

CORPORATE BILLING ACCOUNT APPLICATION

Please fill the attached corporate billing application out and FAX to (956) 380 - 0550 (attention: Amir).

Once the corporate code is activated employer can use the code to register all products and courses available on Zepol and we bill them for everything at the end of the month.

Please print the following information and allow 5 days for processing of this application from receipt by 360. Corporate Account Payment Code information will only be given to the contact person listed on this form and is subject to change.

COMPANY NAME: _____

CHECK TYPE OF BUSINESS:

_____ Partnership

_____ Sole Proprietorship

_____ LLC

_____ Corporation

State: _____

Federal Employer Identification No. or Local State Taxpayer No: _____

DUNS Number: _____ -

CHECK PAYMENT METHOD:

A credit card is required to be on file with 360training, if you select Autopay your credit card will be charged within the first (5) business days of each month. Payment by check or wire transfer is required to be received within 30 days from the invoice date, or the credit card will be charged for the outstanding balance.

Credit Card (mandatory)

Type: MC / VISA / AMEX / DISCOVER (circle one)

Number: _____ Exp. Date: _____

Name on CC: _____

Company Name on CC: _____

Invoice (statements sent on 10th of each month; payment due Thirty Days after Invoice Date)

P.O. Number: _____

MAILING ADDRESS: _____

CITY/STATE/ZIP: _____

Billing Address (if different from above)

----MAILING ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE #: (____) _____ - _____

CONTACT PERSON _____

CONTACT E-MAIL: _____

360training.com, Inc.
13801 N. Mo-Pac Expressway , Ste 100
Austin, TX 78727

Customer Company Name

Customer Address Line 1

Customer Address Line 2

City, State Zip Code

PRINTED NAME

PRINTED NAME

AUTHORIZED SIGNATURE

DATE: _____

AUTHORIZED SIGNATURE

DATE: _____

Please fax completed form to (956) 380-0550 or email to zepolrd@aol.com . Thank you!!!