



3883 Rogers Bridge Rd NW, Suite 501, Duluth, GA 30097
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Dear Customer,

We appreciate your business thus far and we would like to offer an additional complimentary service that will be very beneficial to you. With the online Customer Center, you will have access to the information of current and past sales orders, invoices, return authorization, payments...etc Please kindly let us know which employees you would like to have access and to what kind of information (Billing/Ordering).

Please fill in the blanks and sign below. Email this form back to cherylyi@medipurpose.com. We appreciate your time and effort.

Thank you

Company Name: _____
Main Contact Person: _____
Phone: _____

	Information Type	E-mail Address(es) of the employees who will have access
1)	Billing	
2)	Ordering	
3)	Both	

Notarized Company Signature, date