

**This form allows you to add or remove users from accessing your account.
 Please email completed form to ClientServices@williamsdatamanagement.com**

Company: _____ Account #: _____

ADD

Full Name: _____ Signature: **X** _____ (Required)
 Title: _____ Password: _____ (4-10 characters)
 Phone: _____ Email: _____ (Required)
 Officer: Web Client Access: E-Receipt – Unsubscribe: Department #: _____

Full Name: _____ Signature: **X** _____ (Required)
 Title: _____ Password: _____ (4-10 characters)
 Phone: _____ Email: _____ (Required)
 Officer: Web Client Access: E-Receipt – Unsubscribe: Department #: _____

Full Name: _____ Signature: **X** _____ (Required)
 Title: _____ Password: _____ (4-10 characters)
 Phone: _____ Email: _____ (Required)
 Officer: Web Client Access: E-Receipt – Unsubscribe: Department #: _____

Full Name: _____ Signature: **X** _____ (Required)
 Title: _____ Password: _____ (4-10 characters)
 Phone: _____ Email: _____ (Required)
 Officer: Web Client Access: E-Receipt – Unsubscribe: Department #: _____

Full Name: _____ Signature: **X** _____ (Required)
 Title: _____ Password: _____ (4-10 characters)
 Phone: _____ Email: _____ (Required)
 Officer: Web Client Access: E-Receipt – Unsubscribe: Department #: _____

REMOVE

Full Name: 1. _____ 2. _____ 3. _____
 4. _____ 5. _____ 6. _____

THIS AUTHORIZATION FORM MUST BE SIGNED BY AN OFFICER OR AUTHORIZED PERSON OF THE COMPANY

Full Name: _____ Signature: _____
 Title: _____ Password: _____ Date: _____

This information is intended only for the use of those individuals. Do not copy or distribute. To maintain security of your Account please notify us immediately of any changes. Changes become effective 24 hours after receipt.

WILLIAMS BUSINESS HOURS: 8AM – 5PM, MONDAY – FRIDAY (EXCLUDING HOLIDAYS)