



BILLING AFFILIATION TERM SHEET

Branch Information	
SF Account #	A663327
Branch	
Contractor	
Legal Company Name	
Address	
Phone Number	
Authorized User(s)	
Full Name	
Email	
Phone Number	
Contractor Salesforce Account # (if applicable)	
Branch	
Frequency of usage report	Weekly
Copy of Reports – if yes, email	No
DocuSign	
Name	
Email	

