

# CHANGES AND CORRECTIONS FORM

Account Name	Account Number(s)	Effective Date
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TYPE OF CHANGE: Please provide your updated information in the fields below.

Account Name	New Information
Primary Address Address for billing and general notifications.	
Phone	
Fax	
Shipping Address Address for lab and device supplies. NOTE: You may indicate "Same as Primary" in any address field that you would like to use the same address information as your primary mailing address. P.O. Box cannot be used as a shipping address.	

CONTACT INFORMATION: Check the type of contact information being updated or removed.

<b>Select one type of contact</b> Primary*      Remove MRO            Shipping Secondary     Specimen Billing         Troubleshooting	Name/Title	Department
	Email	Phone
<b>Select one type of contact</b> Primary*      Remove MRO            Shipping Secondary     Specimen Billing         Troubleshooting	Name/Title	Department
	Email	Phone
<b>Select one type of contact</b> Primary*      Remove MRO            Shipping Secondary     Specimen Billing         Troubleshooting	Name/Title	Department
	Email	Phone

\*Please note that if you select *Primary*, the primary contact we have on file will be moved to the secondary contact unless you also select *Remove*.

<b>REPORTING METHOD:</b> Check the reporting method to be added or removed.	
<b>Add:</b> <input type="checkbox"/> ToxAccess™	<b>Remove:</b> <input type="checkbox"/> Fax <input type="checkbox"/> Mail
<b>CLOSE ACCOUNT:</b> If you would like to close your account, please check the box below.	
<b>Please close the account/s listed above:</b> <input type="checkbox"/> Close Account	<b>Reason:</b> _____
<b>IMPORTANT:</b> This form must be signed by authorized personnel and changes will NOT be made effective until a signed copy is scanned and emailed to <a href="mailto:projectdesk@redwoodtoxicology.com">projectdesk@redwoodtoxicology.com</a> . You may also fax this completed and signed form to the Abbott Sales Department at (707) 577-8102.	
Printed Name	Signature
Authorized Title (Manager, Director, Owner, Etc.)	Date

