



## Update Contact Information

In order to update your contact information on file, please fill out the following information using your PDF reader or print and complete the document by hand (please take extra care to write legibly). Once finished, return via fax to 888.825.0800 or email to Billing@VirtualPBX.com.

### Account and Contact Information:

Company Name: \_\_\_\_\_

*(Company must be same as Federal Tax ID documentation if signing up under a Federal Tax ID)*

Street: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zipcode: \_\_\_\_\_ Country: \_\_\_\_\_

### Mailing Address:

Leave blank if mailing address is the same as the address listed above.

Street: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zipcode: \_\_\_\_\_ Country: \_\_\_\_\_

### Primary Contact Information:

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_ Fax Number: \_\_\_\_\_

### Additional Contacts:

Please specify whether each contact should have full system ownership priveleges or billing only priveleges.

Name: \_\_\_\_\_ Privelege Type: \_\_\_\_\_

Email: \_\_\_\_\_

Name: \_\_\_\_\_ Privelege Type: \_\_\_\_\_

Email: \_\_\_\_\_

Name: \_\_\_\_\_ Privelege Type: \_\_\_\_\_

Email: \_\_\_\_\_