

**Customer Information**

New Customer     Update Customer    Customer ID : \_\_\_\_\_  
If Updating Cust or New Internal Cust  
 Business Group: \_\_\_\_\_    Customer Acct Group: \_\_\_\_\_  
User Defined Field 6  
 Customer Name: \_\_\_\_\_  
 Address (Line 1): \_\_\_\_\_  
 Address (Line 2): \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Ext: \_\_\_\_\_  
 Customer Since: \_\_\_\_\_

**Contact Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Title: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Address (Line 1): \_\_\_\_\_  
 Address (Line 2): \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_  
 Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Ext: \_\_\_\_\_ Fax: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 Preferred Communication:     Standard Mail     E-mail     Phone

**Submitted By:**

_____ Signature	_____ Date
Name: _____	
E-mail: _____	
Phone: _____	

**Completed By (FSS):**

_____ Signature	_____ Date
Name: _____	
E-mail: _____	
Phone: _____	

**Please fax or email the signed form to the Financials Service Desk at:**

Fax: 407-882-1211

E-mail: [fntrain@ucf.edu](mailto:fntrain@ucf.edu)