

Customer Contracting Entity Form

Below please fill in company details for the billing and Order creation purposes.

Customer contracting entity (company registration name): *	
Registered address (street, city, zip code, state/province/territory, country): *	
Ship-to address is the same as registered address *	yes/no
Ship-to address if different from registered address	
Company authorized signatory (name and job title): *	
VAT/GST/other Tax registration number: * (If you don't have any such number, fill in N/A)	
Company registration number:	
Finance department Contact (name and email):	
Purchase Order number required (Yes/No): *	

Ι	(name)								in	the	capacity	of	(job	title)
	confirm that the company details stated in this Form are correct and accurate and													
I.	represent	and	warrant	that	Ι	have	the	authori	ty	to	provide	this	inform	nation.
If there are changes to details provided above or Disclosure, I will notify Emplifi by submitting a new Vendor Registration														
Foi	rm	or		via			email			at		billing.o	cz@em	olifi.io.



In on

Signature

*mandatory fieldss