|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **State of Connecticut Addendum**  **Commercial Card Company Record Form** | | | | | | | | | | | | | | | | |
| X | Add |  |  |  | |  | Change |  | |  |  | Delete | |  |  |
|  | | | | | | | | | | | | | | | | |
| Company Name: | | | | |  | | | | | | | | | | |
| Program Administrator: | | | | |  | | | | | | | | | | |
| Address Line 1: | | | | |  | | | | | | | | | | |
| Address Line 2: | | | | |  | | | | | | | | | | |
| City: | | | | |  | | | | State: | | | |  | | |
| Zip Code: | | | | |  | | | | Phone: | | | |  | | |
| Email: | | | | |  | | | | | | | | | | |

|  |  |
| --- | --- |
| **Send New Cards To:** | **Send Reissue Cards To:** |

|  |  |  |  |
| --- | --- | --- | --- |
|  | Administrator |  | Administrator |
|  | Cardholders |  | Cardholders |
|  | Other |  | Other |

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Name: |  |
| Address: |  | Address: |  |
|  |  |  |  |

|  |
| --- |
| **Send Management Reports To:** |

|  |  |  |  |
| --- | --- | --- | --- |
|  | Administrator | Name: |  |
|  | Other | Address: |  |
|  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Organization Approvals** | | | |
| Prepared By: |  | Date: |  |
| (Please Print) |  | | |
| Approved By: |  | Date: |  |

(Authorized Signer)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Print Authorized Signer’s Name: | |  | | | | |
|  | |  | | | | |
|  | | | | | | |
| **Bank Use Only** | | | | | | |
| Signature Verified: |  | |  | Corporation #: |  |  |
| Date Added: |  | |  | Cycle #: |  |  |
| Allow New Accounts: |  | |  | Initials: |  |  |
| Fee: |  | |  | Mgt: |  |  |