



PAPERLESS INVOICE AGREEMENT

Company Name _____

Contact Name _____

Company Billing Address _____

City, State _____ Zip _____

Phone _____ Fax _____

E-mail _____

_____ Send my **INVOICE** via the e-mail address listed above

_____ Send my STATEMENT via the e-mail address listed above (Coming in '09)

By signing below, you are giving consent to Negwer Materials to change the format of distributing your invoice and/or statement.

Authorized Signature _____ Date _____

Title _____

FOR OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE

Customer Number: _____ Sales Contact: _____