

Accounts Receivable Customer Number Request

Mail or fax this form to:

Student Accounting Office
Phone: (530) 752-3649
Fax: (530) 752-5718

Purpose: To add or change a 9-digit "Customer Number" to or in the Accounts Receivable Billing System.

Type of Action (check one): Add Change

Customer Number: _____

If you need multiple numbers, attach a list with the following information:

For a student, use the student identification number.

For an employee, use the employee identification number.

For a member of the general public, organization, or government agency, please provide the following information:

Customer Name: _____

Customer Billing Address: _____

Customer Phone Number (if available): _____

Preparer: _____

Department: _____

Phone: _____

Fax: _____