**Instructions for Audio Only, Video and Web Conferencing**

**AT&T Conferencing with Zoom**

**Bulk Order Form (NS-104) (06/2020)**

|  |  |
| --- | --- |
| **Complete all information on the form in red. If an option is not selecting the default is “No”.**  **Provide all information requested in yellow highlight areas or columns.** | |
| **Company Name** | Name on the monthly invoice of agency requesting the service. |
| **Account ID** | Complete this only if there is an existing account. |
| **Host First Name** | First name of user for a license |
| **Host Last Name** | Last name of user for a license |
| **Host Telephone Number** | Telephone number for user on license |
| **Host Email Address** | Email address for user on license |
| **Address 1**  **City**  **State**  **Zip Code**  **Country** | Physical Address of user on license  City where user of license is located  State where user of license is located  Zip code where user of license is located  Spell out country (ex: United States of America) |