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

**AT&T Conferencing with Zoom**

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

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| **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 licenseCity where user of license is locatedState where user of license is locatedZip code where user of license is locatedSpell out country (ex: United States of America) |