



Officer/Authorized Purchaser Change Form

Date _____

Name of Organization _____

Phone _____ Fax _____

Name _____ (Head of Organization – Principal, Pastor, Director, etc.)

Check if authorized to buy:

President _____ Home Phone _____

Treasurer _____ Home Phone _____

Secretary _____ Home Phone _____

Other _____ Home Phone _____

Other _____ Home Phone _____

Other _____ Home Phone _____

Other _____ Home Phone _____

Other _____ Home Phone _____

Other _____ Home Phone _____