

zinnia® Registered User / Data Ownership Change Request Form

Current SmartOffice® Registered User Name:	
I hereby authorize Zinnia Distributor Solutions LLC to transfer my Smart SmartOffice application, to the new Registered User listed below. I und longer be listed as the registered user of the SmartOffice system in my from SmartOffice.	lerstand that once this request is complete, I will no
Current Registered User Signature:	Date:
New Registered User Name:	
Position/Title:	Email:
New Street Address:	
New City, State and Zip:	
New Phone: ()	
Payment Information: Please complete the attached form with updated	payment information.
As the new Registered User for the SmartOffice system in my office, I as the SmartOffice Master Subscription agreement, and to the payment term	
New Registered User Signature:	Date:
Once completed, please fax all signed doc or email to <u>crmbilling@zi</u> i	

For Internal Use Only	
Server:	Office ID:
MAS90:	
Completed by:	Completed on:

