

Central Bill Setup Request Form

This form is used to convert an existing Business Credit Card or Commercial Card Program from Individually Billed to Centrally Billed. Before requesting this change, please read the Important Information about Central Billing section below and contact your banker or officer if you have any questions.

COMPANY INFORMATION

Company Name _____ Tax ID _____

Requested Change ☐ Add Central Bill ☐ Remove Central Bill

NOTES OR OTHER SPECIAL REQUESTS

**** IMPORTANT INFORMATION ABOUT CENTRAL BILLING ****

Please be aware that the following changes will occur once your company transitions to a Central Bill:

- The new Central Bill account will be established after the current statement cycle ends. This means that a final round of individual bills will be generated.
- **Individual card limits will reset to their full credit line availability ONLY at the beginning of each new cycle.**
 - *Once the cycle limit is reached during a cycle, an administrator will need to increase the cardholder's limit to allow them to continue using the card. The limit change can be made on either a temporary or permanent basis.*
- Payments made during a cycle will post to the Central Bill only, and will not be credited to individual card accounts or affect their availability.
- Company will receive a single Central Bill detailing all cardholder activity and the amount owing. Cardholders will receive individual memo statements that detail transactions made with each card but will show as \$0 due.
- Individual cardholder payments may no longer be made online, as only the Central Bill will show a balance due.
 - Any individual cardholder payments made at a MidFirst banking center or via U.S. mail will be applied to the Central Bill and will not be credited to the individual card account.

COMPANY AUTHORIZATION

By signing this form, Company acknowledges that it has requested that MidFirst Bank establish Central Billing for its Credit Card Account and all associated Cards. Company authorizes Bank to implement the change requested herein, and Company further acknowledges that it understands the changes to its billing process that Central Billing will implement.

Signature _____ Date _____

Printed Name _____ Title _____

Submit completed form to Credit Card Services (CreditCardServices@midfirst.com)

Bank Use Only

Company # :		Product(s) Assigned:	
Company Next Bill Date:		Date Accounts moved to Central Bill:	
Date Central Bill Processed:		Processed By:	