Accounts Receivable Customer Create Form

Utilize this form when requesting a new customer to be added to the A/R system in FAMIS.

Customer Name:

Customer Address:

Customer Phone Number:

Customer Contact Person:

Customer DBA/Alias:

Customer Type: Corporation (CP)

 Individual (IN)

 Non-Profit Organization (NP)

 Other Government Entity (OG)

 Other TAMUS System Parts (PT)

 Research Foundation (RF)

 Sponsored Research (SP)

What is the Sponsor ID/Project Number for the Sponsored Research? The customer number assigned to a SP customer type will be based on the Sponsor ID/Project Number.

Requested by:

Name Department

Email Address Contact Number Date

# Accounts Receivable Use Only:

Customer Number Assigned:

Processed By Date

# Please fax or email this form to the Accounts Receivable Office Fax Number: (361) 825-2909

**Email Address:** **Accounts.Receivable@tamucc.edu**