V1.1

JET FILE TRADING PARTNER AGREEMENT SPREADSHEET

Trading Partner Agreement Spreadsheet Version

DATE	TRADING PARTNER NAME	UAN (if applicable)	ERN (if applicable)	MAILING ADDRESS			
				STREET - PO BOX	SUITE - STE FLOOR - FL	CITY	STATE
	INSTRUCTIONS						
	The narrative Trading Partner Agreement is incorporated by reference as though fully set forth herein.						
	1) Insert rows above for additional office locations if necessary						
	2) Enter Data in ALL CAPS, do not use punctuation						
	3) UAN - if you do not have one, DWC will assign and email your UAN and ERN						
	4) Use USPS abbreviations - see http://www.usps.com/ncsc/lookups/usps_abbreviations.htm						
	5) Trading Partner Category - if "Other" selected, attach explanation						
	6) Note your Challenge Questions and Answers - they are used if you are requesting changes - e.g. to administrator, password, etc.						
	7) Administrators' email addresses must be unique						
	SAMPLES						
1/5/2010	GOOD TIMES INSURANCE CO	GOOD TIMES EUREKA	123456789	PO BOX 1234		EUREKA	CA
6/25/2010	LAW OFFICE OF JOHN SMORES	JOHN JOSMORES ELFIN FOREST	987654321	1234 S STATE ST	STE 321	ELFIN FOREST	CA
12/12/2010	XYZ MEDICAL SUPPLIES	XYZ MEDICAL SAN YSIDRO	654123789	1721 TECUMSAH AVE	STE 99999	SAN YSIDRO	CA
1/1/2010	WE FILE FOR YOU	WE FILE CARLSBAD	456321987	56 W 1ST ST	FL 16	CARLSBAD	CA

		PHYSICAL ADDRESS - (blank if same as mailing)						TRADING PARTNER CATEGORY (select only 1)							
ZIP		STREET	SUITE - STE FLOOR - FL	CITY	STATE	ZIP		Claim Administrator Office	Representative Office	Lien Claimant (unrepresented)	Third-Party Filer	Other		NAME	TITLE
90257		14589 S VERMONT AVE	FL 19	EUREKA	CA	90256		X						FREIDA SMITH	CLAIMS MGR
95687									X					JOHN SMORES	ATTORNEY
78654										X				GEORGE BONECUTTER	PRESIDENT
35687											X			FRED THOMPSON	OWNER

Primary Administrator			CHALLENGE QUESTIONS (answer two)				
E-MAIL ADDRESS	PHONE numbers only Direct 8885551212 extension 8885551212x34	FAX numbers only	FAVORITE PET NAME	MOTHER'S MAIDEN NAME	FAVORITE MOVIE	S-SIGNATURE	NAME
						By entering your S signature, you, on behalf of the office listed herein, confirm you have read, understand and that the office agrees to and accepts the terms and conditions of the JET File Trading Partner Agreement.	
FRIEDA@GOODTIMES.COM	8885551212	8885552121	SMURPHY		THE ALAMO	S FREIDA SMITH	MARTHA JAMES CARLSON
LEGALBEAGLE@SMORES.COM	8885551212X456	8885553113	FLUFFY	TREES		S JOHN SMORES	CAROL CASTAWAY
GEORGE@XYZMEDICAL.NET	8885551212X9874	8885556464		GREENE	24	S GEORGE BONECUTTER	JAMES TOPSER
FRED.THOMPSON@WEFILEFORYOU.COM	5558881212	5558882323	KILLER		PULP FICTION	S FRED THOMPSON	SHIRLEY SMYTHE

Verion 1.0

ALTERNATE ADMINISTRATOR				CHALLENGE QUESTIONS (answer two)				
TITLE	E-MAIL ADDRESS	PHONE numbers only Direct 8885551212 extension 8885551212x34	FAX numbers only	FAVORITE PET NAME	MOTHER'S MAIDEN NAME	FAVORITE MOVIE	S-SIGNATURE	NETWORK IP ADDRESS (optional)
							By entering your S signature, you, on behalf of the office listed herein, confirm you have read, understand and that the office agrees to and accepts the terms and conditions of the JET FIle Trading Partner Agreement.	
ADJUSTER	MJ@GOODTIMES.COM	8885551213	8885552121		TOWNE	PREDATOR	S MARTHA JAMES CARLSON	165.333.557.9
SECRETARY	CASTAWAY@SMORES.COM	8885551212X996	8885553113	SIR BARKS A LOT	ROCKS		S CAROL CASTAWAY	
GRUNT	JAMES@XYZMEDICAL.NET	8885551212X1234	8885556464	ALIEN		CASSANOVA	S JAMES TOPSER	
CONTROLLER	SHIRLEY.SMYTHE@WEFILEFORYOU.COM	5558881214	5558882323		STONE	ALIEN	S SHIRLEY SMYTHE	

TRADING PARTNER TYPE				NAME OF VENDOR SUPPLIER
Discreet Filer - own SFTP transmission	Discreet Filer - Vendor-provided SFTP transmission	Third-Party Filer (TPF)		If you are using vendor supplied software, please enter their name
	X			XYZ IT COMPANY
	X			IT FOR YOU
X				
		X		