



LEeBIZ™ Customer Sign-up Form

Date Form Filled Out (mm/dd/yy):

LEeBIZ user IDs and passwords are only issued to qualified LEESON distributors/customers. If unsure of your status, please call the LEESON District Office closest to you. *All submitted signup forms will be verified for security purposes.*

Company Name (incl. Division/Location):	City/State
Company's Primary Warehouse:	Company's Account No:

****Minimum Password Requirements****
Passwords must be seven or more seven characters
First character cannot be caps
First character cannot be numeric
Last character cannot be numeric
There must be two numbers with the seven (or more) characters
Numbers cannot be next to one another in the sequence
There must be at least one capitalized letter

Individual's User ID:	*** See Rules	Password:	*** See Rules
First Name:	Last Name:		
Privilege Type: <input type="checkbox"/> User or <input type="checkbox"/> Management <i>(Both allow viewing of data but Mgmt includes payments and credit.)</i>			
Email Address:			
Phone Number:	Fax:		
LIST ADDITIONAL USER IDs requested for individuals at the same company below:			
User ID:	***	Password:	***
First Name:	Last Name:		
Privilege Type: <input type="checkbox"/> User or <input type="checkbox"/> Management		Email Address:	
User ID:	***	Password:	***
First Name:	Last Name:		
Privilege Type: <input type="checkbox"/> User or <input type="checkbox"/> Management		Email Address:	

SAVE (into Word version 97 or earlier) and SEND completed form as an email attachment to: helpdesk@rbcmgt.com OR fax to 262-387-5569