Cliff Dressel

Clerk of Court St. Mary Parish P. O. Drawer 1231 Franklin, Louisiana 70538-1231 Phone: (337) 828-4100 Ext. 200

Fax:

(337) 828-2509

Jane C. Pilant Chief Deputy

TO:

ACCOUNTS PAYABLE CLERK

FROM:

CLIFF DRESSEL, CLERK OF COURT

REGARD: APPLICATION FOR CHARGE ACCOUNT

As per your request to establish a charge account with our office, we ask that you read the attached Application for Charge Account form, supply the needed information and return the completed form to us.

Please be reminded that we extend credit with the understanding that each invoice will be paid upon receipt or full payment of the monthly statement. Each month a statement itemizing each unpaid individual invoice is generated and mailed. This statement should be checked against the individual invoices you received during the month and the total amount due shown on the statement paid within 30 days.

Your signature on the new application form is your agreement to abide by our payment schedule. If your account is not paid in full within 30 days, we will close the account and all future activity with our office will be on a cash basis only.

I appreciate your understanding that this office operates just like any other business entity. It is necessary that we collect those fees charged for the work we do in a timely manner. The vast majority of our accounts are paid timely and if you are one of those accounts we sincerely appreciate your cooperation.

If you have any questions in regard to this letter, please let me know.

Sincerely,

Cliff Dressel
Cliff Dressel, Clerk of Court

CLIFF DRESSEL

CLERK OF COURT, ST. MARY PARISH

APPLICATION FOR CHARGE ACCOUNT

| Date: Account Name: Mailing Address: City, State, Zip: Physical Address: | | | |
|---|--|-------------------|---------|
| | | City, State, Zip: | |
| | | Phone: () | Fax: () |
| | | E-Mail: | <u></u> |
| | | Type of Business: | |
| Persons Authorized to Charge: | | | |
| | | | |
| | | | |
| invoice will be directed to the attention of the For firms with multiple individuals requesting | along with recordation receipts, copies, etc. The person making the request for filings, copies, etc. service from our office, please have them direct ment to that invoices can be checked against the | | |
| monthly statement will be sent to me, listing respective month. I understand that upon resimmediately due. I further understand that the 13:845 provided that all fees to the Clerk of as a courtesy and convenience to me, the S | applied for is a thirty (30) day open account. A ng all charges and payments made during the ceiving this statement, the total amount shown is ne law make no provision for open account. R. S. Court, be paid cash. However, I understand that it. Mary Parish Clerk of Court is allowing me the further understand that upon failure to make said ection proceedings instituted. | | |
| Signature of Applicant | _ | | |
| Mail Complet Clerk of Court P. O. Dr | ted Application to: t, St. Mary Parish rawer 1231 n, LA 70538 | | |
| Approved by: | Date: | | |
| Account Number: | Date: | | |
| ACCOUNT NUMBER. | · · · · · · · | | |