Exhibit A *User Information*

User Office Name:
User Contact Name:
Soor Contact Harmon
Llean Contest Malling Address
User Contact Mailing Address:
User Contact Phone Number:
User Contact Fax Number:
User Contact Email Address:
Tax ID(s) under which claims are submitted:
Tax ID(3) under which dains are submitted.
User Log On:
(User choice – maximum of 48 characters)
User Password:

(User choice -see rules below)

- Minimum length of 6 characters
- Your username cannot be part of your password
- Your password must contain at least 1 numeric character (0-9)
- Your password must not contain sequential characters (ie: abc, 789)
- Your password must not contain repeating characters (ie: 222, zzz)
- Your password must not contain a word found in the dictionary (ie: cat, him, book)

Do not disclose your password to anyone at any time.

Do not store your password in written form in any location.

The Humboldt IPA Online Status Tracking System User Agreement -Fax Completed Form to 707-443-2527