

Instructions for Completing the EDI Sender Acceptance Form

Please read all pages

This form is “**fillable**.” That means you can type the information onto the form from your computer and print the form. You will not be able to save the form onto your computer’s hard drive.

When you open the form, click in the “Sender Company Name” box (field) and use the tab key to navigate to the next field. Do not use the Enter key; pressing the Enter key will only page down. Each field has been *limited*. This means that you cannot continue to type information into a field if it doesn’t fit into the space provided.

To clear or delete all the information you have typed onto the form, click on the red “**Clear Entire Form**” button. To change the information in one field, use the backspace or delete key.

Adobe Acrobat - [WC175 EDI Sender Acceptance Form.pdf]

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COLORADO DEPARTMENT OF LABOR AND EMPLOYMENT
DIVISION OF WORKERS' COMPENSATION

EDI SENDER ACCEPTANCE FORM

The undersigned hereby accepts the Colorado EDI Sender Requirements as detailed in the Electronic Data Interchange Participation Policy for FROI.

**“Clear Entire Form” button
Clears all information at once**

Clear Entire Form

Sender Company Name

Sender Authorized Representative Signature

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Wednesday
5/28/2003

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DIVISION OF WORKERS' COMPENSATION

EDI SENDER ACCEPTANCE FORM

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Sender Company Name

Sender Authorized Representative Signature

Sender Authorized Representative Printed Name

Sender Authorized Representative Title

Date Signed