



Account Receivable File Information

ACCOUNT NUMBER	Required
COMMENT CODE	
NAME	Required
DBA	
ADDRESS	Required
ADDRESS 2	
CITY	Required
STATE	Required
ZIP	Required
PHONE	
SIC CODE	
YEARS CUSTOMER	
TERMS	Required
LAST SALE	
EXTRACT DATE	
HIGH CREDIT	
BALANCE/AMOUNT DUE	Required
CURRENT	Required
1-30 DAYS	Required
31-60 DAYS	Required
61-90 DAYS	Required
91+ DAYS	Required
AGING 121+ DAYS	
FAX	
CREDIT LIMIT	
ACCOUNT STATUS	

Please utilize as many of the fields as possible.

Please submit aging as an ASCII comma delimited file, tab delimited file, fixed format text file or an Excel file (XLS or XLSX).

You may submit your file via SFTP or via e-mail to dataprocessing@commandcredit.net.

Download SFTP instructions at http://commandcredit.net/alpha/files/download/CCC_SSH_Setup.pdf