

## LEADS Billing Information

Please provide information concerning who should receive the LEADS Invoices.

Return this completed form to LEADS via mail, fax or e-mail:

LEADS BILLING

PO Box 182075

Columbus, Ohio 43218-2075

**Fax:** (614)-995-1230

**E-mail:** [LEADSAdmin@dps.ohio.gov](mailto:LEADSAdmin@dps.ohio.gov)

If you have any billing questions please call LEADS Fiscal at (614)-466-8781

Agency Name: \_\_\_\_\_

Agency ORI: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Billing Contact Person: \_\_\_\_\_

Telephone Number for Billing Contact: \_\_\_\_\_

Alternate Billing Contact Person: \_\_\_\_\_

Alternate Contact's Telephone Number: \_\_\_\_\_

Agency E-mail Address: \_\_\_\_\_

Purchase Order # (if known): \_\_\_\_\_

**Preferred Billing Cycle:** (please check one)

**Monthly**    **Quarterly**    **Bi-Annual**    **Annual:** please circle one following choices for annual billing cycle  
1. Jan – Dec or 2) July-Jun or 3) Oct-Sept

**Preferred Method of Payment:**

\_\_\_\_\_ Check

\_\_\_\_\_ Electronic Funds Transfer (EFT) – Please obtain an ACH Vendor Form from your Agency's finance department and send the completed ACH form to:

**Ohio State Highway Patrol  
Fiscal Service – LEADS  
PO BOX 182074  
Columbus, Ohio 43218-2074  
Attn: Kristina Grooms**

\*Federal Agencies that wish to use EFT can search our agency through Central Contractor Registration (CCR). The Ohio State Highway Patrol is registered with DUNS# 808847842.