



3370 Vineville Avenue, Macon GA 31204  
478.474.8779

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## POSITIVE IDENTIFICATION FORM

*Please complete the following, attaching the necessary documentation as noted.  
Send this document and attachments to [accounting@waynereaves.com](mailto:accounting@waynereaves.com).*

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Company Name

Owners Name (print)

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Business Phone Number

City & State

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As owner of the company listed above, I give permission to the staff at Wayne Reaves Computer Systems to break the unknown or forgotten password of my software. I have researched to the best of my ability to recover my password and understand that by breaking the established password, I will have complete access to change any settings in my program, enter the checkbook program, change inventory cost figures, etc. wherever password protection is in effect.

By signing this form and providing ownership documentation (as requested), I am giving permission to Wayne Reaves Computer Systems to break the password system, regardless of whether or not I am at the company office at that time and that Wayne Reaves Computer Systems has no way to verify the identity of the person calling.

Wayne Reaves Computer Systems is not liable for legal repercussions encompassing the owner's renewed ability to enter password protected areas of its program as a result of this procedure. I have made a safety backup copy of my data files before continuing.

This form is only good for the date signed below. If the password needs to be broken again, a new form must be completed in its entirety, along with attachment(s) requested below.

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Owner's Signature

Today's Date (print)

**Please attach a copy of the driver's license of the company owner & the person that signed the purchase agreement from Wayne Reaves Computer Systems. This person may or may not be the same individual. If the signature provided is not the owner of the company, we must also have a copy of the Used Car License showing the actual owner of the contract.**