



Electronic Invoice Request Form

Please return completed forms to Carole Gross cgross@pepartners.org to enroll in paperless billing.

Member Name: _____

Contact Name: _____

Title: _____

Contact Phone: _____

Email Address: _____

- ☐ I would like to receive only electronic invoices.
- ☐ I would like to receive electronic invoices AND a paper copy.

Information will be applied to all lines of coverage. If additional email address needs to be added, please fill out an additional form.

All invoices will be sent from AccountsReceivable@pepartners.org

Please add this to your address book.

Questions about this program?

Carole Gross

cgross@pepartners.org

615-371-6020

Please Note: PE Partners is required by the Tennessee Comptroller's Office to send all invoices directly to members only.