Reporting Xpress

<u>Access Request Form for New Users</u>

Please return the completed form to the ACA office. Once access has been granted, we will send you an email with the login instructions. If you have any questions, please contact us at 314.792.7680.

Email: acaoffice@archstl.org	Fax: 314.792.7229	20 Archbishop May Drive Saint Louis, MO 63119

Please complete the information below:

Name: _____

Email Address: _____

Phone: _____

Parish Name: _____

Parish Number: _____

Parish City: _____

User ID and Password

Your Reporting Xpress User ID will be assigned as your 'first name+last name' with the domain @archstl.rxlogin.org (e.g., johnsmith@archstl.rxlogin.org).

Your initial password will be provided in a welcome email from the ACA office. When logging in the first time, you will be prompted to change your password.

User's Signature: _____   Date: _____

YOUR PASTOR'S SIGNATURE IS REQUIRED.

Pastor's Signature: _____   Date: _____