

## **COMPANY INFORMATION:**

| Name:  |   |                            |  |
|--|---|----------------------------|--|
| Address:   |   |                            |  |
| Phone:   |   |                            |  |
| Fax:   |   |                            |  |
| PURCHASI   | NG REPRESENTATIVE:                          | ACCOUNTING REPRESENTATIVE: |  |
| Name:  |   | Name:                      |  |
| Phone:   |   | Phone:                     |  |
| Fax:   |   | Fax:                       |  |
| Email:   |   | Email:                     |  |
| PREFERENCE FOR RECEIVING INVOICES (Please Mark One):  Email: Mail: Fax:                                    |   |                            |  |
| EIIIdII.   | IVIdII.                                     |                            |  |
| TAX FORMS:   |   |                            |  |
| Do you have a 'Re-Sale' or 'Tax Exempt' Form? (If Yes, Please Attach):                                     |   |                            |  |
| Yes:   | No:   |                            |  |
| UPS ACCOUNT:   |   |                            |  |
| Most Small Orders are Shipped Via UPS. Do you have a UPS Account Number You Would Like Us to Keep on File? |   |                            |  |
| Number:  |   |                            |  |
| CREDIT CA  | RD ON FILE (For Credit Card Accounts Only): |                            |  |
| Name on C  | Card:                                       | Expiration:                |  |
| Card Type:   |   | Sec Code:                  |  |
| Card Numb  | ber:  | Billing Zip:               |  |



**CORPORATE / WEST COAST:** 

**MIDWEST / EAST COAST:** 

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