

	Contac	ct Informati	ion			
Company Name:		Email A	Email Address:			
Contact Name:		Shippir	Shipping Address:			
Phone Number:						
		,				
	Accounts Payable	/ Accounti	ng Information			
A/P Contact Name:		A/P Pł	A/P Phone Number:		A/P Fax Number:	
A/P Email Address:		Billing <i>i</i>	Billing Address:			
	Additional Co	ompany Inf	ormation			
Type of Business:	Sole Proprietorship		Partnership		Corporation	
Website Address:	-					
Years in Business:		Dun & F	Dun & Bradstreet Number:			
President / Owner:		Initial C	Initial Order Value (in dollars):			
# of Employees:		Est. Mo	Est. Monthly Label Spend (in dollars):			
Annual Company Revenue:		Credit I	Credit Line Requested (in dollars):			
	Credit / T	rade Refere	ences			
Company Name :		Phone	Phone Number:		Fax Number:	
Email Address:	Address:		1		Current Credit Limit:	
Company Name 2:	•	Phone	Number:		Fax Number:	
Email Address:	Address:	I		Current Credit Lim	nit:	
Company Name 3:		Phone	Number:		Fax Number:	
Email Address:	Address:			Current Credit Limit:		
Everything stated above is correct and corbank and trade references to verify the finareasonable attorney's fee, should collection	ancial condition of the applican	nt company. Al	l costs of collection	will be debtor's	s responsibility, including a	
Full	Name		Signature:		Date (YYYY/MM/DD)	