

# Functional Botanicals

## ACCOUNT SET UP FORM

Company Name

EIN:

Billing Address:

Shipping Address:

## CONTACT INFORMATION

Buyer:

Title:  Phone Number:

Email:

Accounting:

Title:  Phone Number:

Email:

:

Terms:  PrePay  Net 15  Net 30  Net 45

By signing I certify this information herein is true and correct. I agree to Functional Botanicals LLC Terms.

Signature:

Printed Name:

Title:

Please email this completed form to:  
wholesale@functionalbotanicals.com

Date:

541-708-1387

THANK YOU FOR YOUR INFORMATION

WWW.FUNCTIONLABOTANICALS.COM