

APPLICATION FOR OPEN ACCOUNT

GREENSBORO OFFICE SUPPLY, INC
PHONE (336) 272-4107 FAX (336) 272-2440
1-800-756-6560 1-800-756-6581

DATE _____ SALESPERSON _____

NAME OF COMPANY _____
STREET ADDRESS _____
MAILING ADDRESS _____
CITY _____ STATE _____ ZIP CODE _____
PHONE # _____ FAX # _____
EMAIL _____
INCORPORATED _____ PARTNERSHIP _____ INDIVIDUAL _____
PERSON RESPONSIBLE FOR PAYMENT _____
PERSONS AUTHORIZED TO PURCHASE _____

DO YOU USE A PURCHASE ORDER? YES _____ NO _____
DO YOU WISH TO PAY FROM: INVOICE _____ STATEMENT _____
ESTIMATED MONTHLY OFFICE SUPPLY PURCHASES \$ _____
HOW MANY OFFICE PERSONNEL DO YOU EMPLOY ? _____

REFERENCES:
BANK _____ BRANCH _____
BUSINESS _____

REMARKS _____

CREDIT CARD: MC__ VISA __ CARD # _____ EXP _____
NAME AS IT APPEARS ON CARD: _____

In order to fairly establish your credit line, and to keep our liability to a Minimum, GREENSBORO OFFICE SUPPLY, INC may check your current credit ratings.

AUTHORIZED SIGNATURE _____