

Credit Application

Comp	oany Information:	
Name	2:	
Address:		
Bill To):	Ship To:
Phone	e/Fax:	
Feder	al ID# (Tax ID#):	
Doing	Business As:	
Comp	oany Contacts:	
Αссοι	ınts Payable:	
Accounts Payable E-mail:		
Purchasing:		
General:		
Refer	ences:	
1./	Bank:	
	Address:	
	Phone:	
	Account #:	
2./	Company:	
	Address:	
	Phone:	
	Account #:	
3./	Company:	
	Address:	
	Phone:	
	Account #:	
the b perta	est of my knowled ining to our credit. The	for the purpose of obtaining credit and is warranted to be true and correct to ge. We authorize GAAS Corporation to investigate the references listed ne signature below attests to financial responsibility, ability and willingness to oration within the terms specified in the invoices.
Autho	orized Signature:	Date: