

Account # \_\_\_\_\_



Account Representative: \_\_\_\_\_

Bill to Name: \_\_\_\_\_

Ship to Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

<b>Office Use Only &lt;PG&gt;</b>

Is this a residential address? Yes \_\_\_ No \_\_\_

Do you have other locations? Yes \_\_\_ No \_\_\_

If yes, how is the purchasing and billing set up?

Central \_\_\_\_\_ Independently \_\_\_\_\_

Sales Contacts: \_\_\_\_\_

Phone: \_\_\_\_\_

Payable Contact: \_\_\_\_\_

Fax: \_\_\_\_\_

Business Type: \_\_\_\_\_

E-mail: \_\_\_\_\_

How did you hear about Strybuc: \_\_\_\_\_

Email Newsletter Y  N

Web Site: \_\_\_\_\_

Payment: Credit Application: (Mail) \_\_\_ (Fax) \_\_\_ COD \_\_\_ Visa/MC \_\_\_\_\_ Exp \_\_\_\_\_

Tax Exempt\*: Yes \_\_\_\_\_ No \_\_\_\_\_

*\*If yes, tax exempt certificate is required.*

Sales Rep #		Ordered By		Purchase Order	Order Date	Phone#	Incoming Call / Outgoing Call	
#	Quantity	Back Order	Shipped	Part #	Description	Price	Amount	
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								

Special Instructions: \_\_\_\_\_

Who are you currently buying from? \_\_\_\_\_ Annual Sales: \_\_\_\_\_

What type of products do you use/sell? \_\_\_\_\_