

Electronic Application (Must be signed, then e-mailed or mailed to FriendsOffice.)

Friends Sales Associate	<input type="text"/>		
Legal Company Name	<input type="text"/>		
DBA (if different than Legal Company Name)	<input type="text"/>		
Phone	<input type="text"/>	Fax	<input type="text"/>
		Purchasing Contact E-mail	<input type="text"/>

Bill To (include county):

Ship To (include county):

Business Type

- School
 Church
 Government Agency

Federal Tax ID #

Estimated Monthly Amount

Purchase Order Number Required? (yes or no)

Accounts Payable Contact Information

Name	Phone	Extension	E-mail
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

The undersigned applicant certifies the above information is true and correct and authorizes FriendsOffice to contact all references listed to verify information on the applicant's company. The undersigned agrees to pay all charges in accordance with payment terms of Net 15 days. A late fee of 1.5% per month will be applied to balances older than 30 days. Should credit availability be granted by FriendsOffice, all decisions with respect to its extension or continuation shall be in the sole discretion of FriendsOffice. FriendsOffice may terminate any credit availability within its sole discretion. If the undersigned applicant's account is placed in the hands of an outside agency for collection, the undersigned agrees to pay reasonable attorney fees and collection costs, even though legal proceedings are not filed.

Print Name

Title

Signature and Date

*Only authorized signature can be accepted electronically