

(503) 691-1900

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## APPLICATION FOR CREDIT

PLEASE FAX TO (503) 885-1984

DATE:	RESALE #	PHONE #	
COMPANY NAME:		FAX #	
BILL TO ADDRESS			
SHIP TO ADDRESS			
DATE COMPANY STARTE	 D:	PURCHASING AGE	NT
HOW DO YOU USUALLY P	AY?: 30 DAYS	45 DAYS	60 DAYS
TYPE OF BUSINESS: INDI\	/IDUAL	CORPORATION	PARTNERSHIP
COMPANY OFFICERS: PR	RES	V-PRES	
SE	ECT	TREAS	
BANK			ACCT #
TRADE REFERENCES: NAME:	Р	HONE #	FAX#
1:			
2:			
3:			
4:			
5:			
6:			
I/WE HEREBY CERTIFY AS	TO CORRECTNES	S OF THE ABOVE APPLIC	CATION FOR CREDIT AND AYS FROM INVOICE DATE.
SIGNED:	٦	TITLE:	DATE:
***************************************	St	ore Locations: ———	
20150 SW Avery Court Tualatin, OR 97062		75-C Conger St. gene, OR 97402	9340-A 7th Street Rancho Cucamonga, CA 91730
Fax 885-1984		Fax 484-4703	Fax 980-0629

(541) 484-4413