ALBERT PAPER COMPANY

1225 N. Union Street, Stockton, CA 95205 - Phone:(209)466-7931 - Fax:(209)466-6516

CREDIT APPLICATION

All orders taken before credit is established will be handled on a prepay basis by Visa, MasterCard, American Express or check.

New Customer Existing Customer			Sales Rep:
Customer Since: Curre	nt Term:	_ Current Credit Li	ne:
Business Name:	Trade Name/DB	A: \	Website:
Contact:	Phone:	Fax:	Email:
Office Address:			
City:	State:	Zip:	No. of Employees:
Bill to Address:			
City:	State:	Zip:	Yrs. At Location:
Yrs Established: Federal ID	or SSN#	Rese	eller No.
Nature of Business: () Sole Pro	orietor () Partners	ship () Corporat	tion () LLC
Type of Business:	Annual Sale	es: \$ Est.	Monthly Purchases: \$
Accounts Payable Contact:	Email:		Phone:
Purchasing Contact:	Email:		Phone:
Term Request: () Wire Transfer () Prepaid ()COI	D () Net	Credit Line Request: \$
	BANK RE	FERENCE	
Bank Name:			
Contact Person:	Phone:		Fax:
Address:			
City:	State:		Zip:
Checking Acct No.		Savings Acct No.	
	TRADE RE	FERENCE	
Company Name:	Phone:		Fax:
Contact Person:		Account No.:	
Company Name:	Phone:		Fax:
Contact Person:		Account No.:	
Company Name:	Phone:	_	Fax:
Contact Person:		Account No.:	
I/we hereby apply for credit and affirm solvency. The above information as well as the attached f applicable, I/we agree to pay a monthly finance collection & litigation on this account in accorda with respect to the extension or continuation of bank references and trade references to discloss attach a copy of the seller's permit.	inancial statements, trade in charge of the minimum apply nce with the laws of the juri credit shall be in sole discre	nformation and bank relablicable state rate on all isdiction venue of the subtion of the subtion of the subplier. I/w	ferences is warranted to be true and complete. past due balances. I/we agree to pay all costs upplier's discretion. I/we agree that the decision we, the undersigned, hereby authorize the listed
Signature/Title: Print Name:			Date:
rinit Name.			