



Credit Application

Courier

Return to: Christine Garbatini
 Courier Corporation
 15 Wellman Avenue
 North Chelmsford, MA 01863
 Tel: 978-251-6015 Fax: 978-251-6346
 E-mail: cgarbatini@courier.com

**For the purpose of obtaining credit from you,
 I/We make the following statement:**

BILLING ADDRESS

Company _____
 Street _____
 City _____ State _____ Zip _____
 Phone _____ Fax _____
 E-mail _____

ORGANIZATIONAL INFORMATION

Courier Sales Rep _____
 Nature and type of business _____
 D./B./A. Partnership Individual Corporation
 Parent company _____
 Year of founding or incorporation _____
 President, owner, or administrator _____
 Treasurer _____
 Accounts Payable Mgr. _____
 Other persons to be contacted with regard to financial commitments:
 Name _____
 Phone _____
 Name _____
 Phone _____
 Please furnish a copy of your most recent annual report.
 Do you have a DISC subsidiary? Yes No
 If you are exempt from sales tax, please enclose a copy of your exemption certificate
 Certificate No. _____

TRADE REFERENCES (List minimum of three)

Please do not use oil companies, credit cards, IBM, Xerox, or public utilities, as these firms will not confirm such information.

Firm _____
 Street _____
 City _____ State _____ Zip _____
 Phone _____
 Firm _____
 Street _____
 City _____ State _____ Zip _____
 Phone _____
 Firm _____
 Street _____
 City _____ State _____ Zip _____
 Phone _____

BANK REFERENCES

Name of bank _____
 Street _____
 City _____ State _____ Zip _____
 Bank officer _____
 Phone _____
 Name of account _____
 Account number _____

If representations made by the Buyer in this credit application are subsequently found incorrect or incomplete, the right is reserved to reject the application and to negate any obligation to proceed with shipment of any merchandise. The Buyer agrees, however, that any expense incurred as a result of reliance upon incomplete or incorrect statements made by the Buyer herein may be chargeable to Buyer.

Date _____
 Name and title _____
 Authorized signature _____