

NEW ACCOUNT FORM -- C.O.D. ONLY

Please fill out completely:

Date: _____
 Company Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Business Phone: _____ Fax: _____
 Owner's Name: _____
 Address: _____ City: _____ State: _____
 Home Phone: _____ Date of Birth: _____
 Driver's License: _____
 Building: Home/Garage: _____ Storefront: _____
 Approx. Size of Bldg.: _____ Own/Lease: _____
 Number of Employees: _____
 Type of Business: _____
 Major Equipment (Optional): _____
 Hi-Lo: _____

_____ Sales to Complete the Following _____

Business Card

 Salesperson: _____
 Sales Call (Date of Visit): _____
 Confirm Information on This Page: (Initial): _____
 Comments: _____

 Catalog: _____ Samples: _____
 Price Class: _____
 Salesperson #: _____
 Ship via Territory: _____
 KAL Approval: _____

Business Status: (Select One) Corporation _____ Partnership _____ Individual _____

Tax Status: Taxable: _____ Exempt: _____ (Fill out Page 2)

Bank (Business): _____ Account Number: _____

Who Is Authorized To Purchase?

Names of Other Distributors Currently Purchasing From:

<u>Account Status</u>		<u>Estimated Monthly</u>
<u>Open</u>	<u>COD</u>	<u>Purchases</u>

Estimated Monthly Purchases from All America Plywood: _____

I agree that the information on this form is true to the best of my knowledge and agree to all terms and conditions of sale.

Signed: _____ Date: _____

STARTING PRICE CLASS: _____ SALES #: _____ SHIP VIA: EE, MM, WW, OO: _____ KAL APPROVAL: _____