

Please complete and return this form to: 22833 SE Black Nugget Road, Suite 130, Issaquah, WA 98029 or to (fax) 800.884.8577.

Order Pending?	rder Pending? Yes-Invoice#_		No		Authorization for Release of Bank Information	
				- BANK	ACCOUNTS	
CUSTOMER#	COMPANY	NAME		BANK	ACCOUNT#	
ADDRESS				ADDRESS		
CITY	STATE	ZIP		CITY	STATE ZIP	
BUSINESS PHONE BUSINESS F		FAX BUSIN	NESS E-MAIL	PHONE	CONTACT NAME	
DATE BUSINESS STARTED LIMIT REQUESTED\$				To Whom It May Concern:  This authorizes you to provide SanMar Corporation with the information requested regarding the status of our account.		
ASI#	DUN & BRADSTREET#			Terms and Conditions for Application for		
Structure of Busin	ess:				mpany Check Limit to obtain such information as you may require concerning	
Corporation/LLC	Partnership	Proprietorship		the statements made in this application and agree that the application including the information furnished by me, are true and complete and are made for the purpose of obtaining an increased COD company check limit.		
Primary Line of Bu	siness:			further agree to	submit such additional information concerning my financia	
☐ Screenprinter (Exclusively) ☐ Embroiderer (Exclusively)				status as you request. It is understood and agreed that the undersigned will continue to be liable in the event of the sale of the business withou		
Embroiderer/Screenprinter		<ul><li>☐ Uniform Dealer</li><li>☐ Sporting Goods Dealer</li></ul>		complying with the bulk sales law. If there are any changes in the structure of my company, I will notify SanMar. I have read and agree to the terms and conditions of this application.		
Promo Products Dist. (Exclusively)						
Promo Products D	ist./Embroiderer			Terms and Cor	nditions of Sales	
References:					es to pay any/all costs of collection due to the failure to pay	
1.					is or any other agreement with seller including services o osts of suit and reasonable attorney's fees.	
COMPANY NAME				_		
				AUTHORIZED SIGNE	ER ON ACCOUNT	
PHONE	FAX	CONTACT NAME				
2.						
COMPANY NAME				_		
PHONE	FAX	CONTACT NAME		_		
3.						
COMPANY NAME				_		
PHONE	FAX	CONTACT NAME		_		