



GEM STATE PAPER & SUPPLY COMPANY

P. O. BOX 469 • TWIN FALLS, IDAHO 83303-0469
1-208-733-6081 • 1-800-727-2737 • FAX 1-208-734-9870

OFFICE USE ONLY

Account Number _____
Salesman _____
Sales Tax Number _____
Credit Limit _____
Entered _____
Credit Approved By: _____
Date _____

Customer Application

Dear Customer:

We will appreciate basic financial information so that we may document our records and also to be used as a basis of credit extension to you. This information will be held in strict confidence. A credit report will be pulled and application must be signed.

Name of Business _____ Sole Proprietor Subsidiary Corp
Mailing Address _____ Partnership Government Agency
Delivery Address _____ Corporation Govt. Funded Project

City _____ State _____ Zip _____
Business Phone _____ How Many Years In this Business? _____
Home Phone _____ At this Location? _____
Fax Number _____ E-mail Address _____

Do You Own Rent Lease, How long _____

Approximate Credit Requested: \$ _____
(PER MONTH)

Type of Business _____

If Incorporated, in what State _____

Owners _____ (NAME) _____ (SOCIAL SECURITY NO.)

Owner's Address _____ (CITY) _____ (STATE) _____ (ZIP)

If less than 6 Mos.,
Previous Address _____ (CITY) _____ (STATE) _____ (ZIP)

Principal Stockholders _____ (NAME) _____ (TITLE) _____ (SOCIAL SECURITY NO.)

_____ (NAME) _____ (TITLE) _____ (SOCIAL SECURITY NO.)

_____ (NAME) _____ (TITLE) _____ (SOCIAL SECURITY NO.)

If Subsidiary,
Name of Parent Co. _____ (PHONE)

Address _____ (CITY) _____ (STATE) _____ (ZIP)

Billing Address _____ (IF DIFFERENT THAN ABOVE) _____ (CITY) _____ (STATE) _____ (ZIP)

Billing Instructions _____ (PERSON OR DEPARTMENT TO WHOM BILLING SHOULD BE SENT)

Authorized Buyer _____ (NAME) _____ (TITLE) _____ (PHONE)

Name of Officer to
Contact for Further
Credit Information _____ (NAME) _____ (TITLE) _____ (PHONE)

BANKING INFORMATION

1. _____ Address _____
(BANK)

2. Account No. _____
 Savings
 Checking
 Loans (OFFICE/MANAGER HANDLING ACCOUNT IF APPLICABLE)

TRADE REFERENCES OF MORE THAN 1 YEAR:

1. Name _____ Phone _____
Address _____
(CITY) (STATE) (ZIP)

2. Name _____ Phone _____
Address _____
(CITY) (STATE) (ZIP)

3. Name _____ Phone _____
Address _____
(CITY) (STATE) (ZIP)

Payment Terms: Net-Due after invoiced delivery. No later than the 10th of following month. Past due thereafter. **Finance Charges:** Monthly periodic rate of 1 1/2% corresponding to annual rate of 18% or 50¢ minimum charge to be added to any account with a past due balance.

The undersigned does request that credit be extended by Gem State Paper & Supply as set forth above*, and in consideration thereof, guarantees payment of the foregoing as and when due.

PLEASE SIGN HERE AFTER READING ENTIRE APPLICATION. SIGNATURE MUST BE BY OWNER OR CORPORATE OFFICER.

X _____
(SIGNATURE HERE) (PLEASE PRINT NAME HERE)

(TITLE) Date _____

***A CREDIT REPORT WILL BE PULLED BASED ON THE ABOVE INFORMATION.**

Gem State Paper & Supply Co.

PLEASE SEND PAYMENTS TO:
P.O. BOX 469 • TWIN FALLS, ID 83303-0469
(208) 733-6081 1-800-727-2737

POLICY ON RETURNED ITEMS

- No returns after 14 days
- Minimum 15% Restocking Charge on all returned items
- Proof of Purchase required for returned items
- No Returns on:
 - Sale Items
 - Close Outs
 - Special Orders
 - Opened Food/Food Service Items
 - Soiled, Stained or Non-sellable Items
 - Items not in Original Container
 - Open Liquids—Factory Seal Broken
- All returns are subject to approval

SHORTAGES AND DAMAGES

Must be called to our attention within 48 hours of delivery or receipt of merchandise

**SPECIAL ORDERS MAY REQUIRE DEPOSIT
OR TO BE PREPAID**

SALES TAX

Tax certificate must be on file or sales tax will be charged.

TERMS OF SALE

Terms: Net due after invoiced delivery. No later than the 10th of the following month. Accounts past due are subject to a "HOLD" of merchandise or COD on order only.

Finance Charge: A finance charge of 18% will be charged on any accounts past due, which is a monthly finance charge of 1 1/2% per month.

Returned Checks: There is a \$20 charge on all returned checks.

Prepaid Delivery on Our Trucks: Delivery on our regular scheduled trucks is PREPAID. Delivery made to business accounts only and will not be left without authorized signature.

Shipments: All orders F.O.B. our warehouse, shipping and handling fee is \$4.95.