

ACCOUNT EXECUTIVE:

Website: <u>www.atchesonexpress.com</u> Tax ID: 95-4373893

Customer Profile

Company Name (full legal name)			Corporation	Partnership Sole Proprietor
State	Tax ID#		DUNS #	
DBA		Pare	nt Company	
Date Established	Type of Business			
Company Physical Address		City	State	Zip
Accounts Payable Address		City	State	Zip
Paperless Billing & Statement Email Address				
AP Contact Name		Title		
() AP Contact Phone Number		AP Email Addr	ress	
Billing Requirements				
Management, Officer, or Owner Name		Title		
() Phone Number		Email Address	······	

Bank Information

City	State	Account Number	
	()		
Contact Name	Phone Number		
	- 	()	()



Please send completed form to Lupe@atchesonexpress.com

Credit Dep Email: <u>Lupe@atchesonexpress.com</u> Website: <u>www.atchesonexpress.com</u> Tax ID: 95-4373893

Company Suppliers / References

Company Name		City	State	Zip
	()		()	
Contact Name	Phone Number		Fax Number	
Email Address				
		<u></u>	Choka	7:
Company Name	()	City	State	Zip
Contact Name	() Phone Number		() Fax Number	
oontdot hanno				
Email Address				
Company Name		City	State	Zip
	()		()	
Contact Name	Phone Number		Fax Number	
Email Address				

Credit Agreement

In consideration of the credit to be extended to me/us under this agreement, I/We here with agree to pay all invoices within the agreed to terms of NET 30 DAYS; that in the event of default on any invoice ATCHESON'S EXPRESS, LLC shall have the right to declare all invoices due and payable at once; that in the event legal action is instituted to enforce collection, to pay reasonable attorney's fees and costs for such legal action. In the event of a dispute or litigation between the parties, it is here agreed that Jurisdiction and Venue shall be in Orange County, California. I/We authorize ATCHESON'S EXPRESS, LLC to run credit reports and/or confirm the information in this credit application. I/We further agree to the terms and conditions contained within the tariffs of ATCHESON'S EXPRESS, LLC and on the ATCHESON'S EXPRESS, LLC invoice. I further authorize my/ our bank to release general information to ATCHESON'S EXPRESS, LLC if they so request. I further declare that I have the authority to apply for credit on behalf of the named entity. That upon payment in full of any invoices this agreement will remain in effect and will apply to any and all invoices thereafter.

X Signature	Printed Name / Tilte
Date	Address
() Your Phone Number	Your Email Address