

ACCO Brands Corporation dba GBC

Credit@acco.com or Fax (847) 403-4863

BUSINESS INFORMATION

Company Name: _____ Company Website: _____

Address: _____ City: _____ State/Zip: _____

Years in Business: _____ Federal ID#: _____ Business Entity: Corp: _____ Proprietor: _____ Partnership: _____

Accounts Payable - Email: _____ Phone Number: _____ Fax Number: _____

Is your company tax exempt? _____ Yes _____ No - If the answer is YES please attach all applicable exemption certificates. If you are drop shipping our product we need an exemption certificate for those states where you drop ship.

Does your company require a purchase order? _____ Yes _____ No - If the answer is YES please attach your Purchase Order rules or requirements.

BANK INFORMATION

Bank Name: _____ Contact Name: _____

Address: _____ City: _____ State/Zip: _____

Contact Email: _____ Phone Number: _____ Fax Number: _____

Type of account(s): Checking: _____ Savings: _____ Line / Loan: _____

Account numbers: _____

TRADE REFERENCES

Company Name: _____ Contact: _____

Address: _____ City: _____ State/Zip: _____

Contact Email: _____ Phone Number: _____ Fax Number: _____

Average Monthly Purchases: \$ _____ Product Type: _____

Company Name: _____ Contact: _____

Address: _____ City: _____ State/Zip: _____

Contact Email: _____ Phone Number: _____ Fax Number: _____

Average Monthly Purchases: \$ _____ Product Type: _____

Company Name: _____ Contact: _____

Address: _____ City: _____ State/Zip: _____

Contact Email: _____ Phone Number: _____ Fax Number: _____

Average Monthly Purchases: \$ _____ Product Type: _____

Applicant Name _____ Title: _____

Applicant Signature _____ Date _____

I authorize the release of the above credit information to GBC for its use only. I understand that GBC extends credit terms of net thirty days unless otherwise agreed upon in writing by both parties.