

# STRATTON CAMERA

## Credit Reference Information

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone: \_\_\_\_\_

### Type Of Business

Corporation  Partnership  Sole Proprietor  Year Est. \_\_\_\_\_

Federal Tax ID: \_\_\_\_\_

### Officers of Corporation

Name \_\_\_\_\_ Name \_\_\_\_\_

Title \_\_\_\_\_ Title \_\_\_\_\_

### Trade References (Give only names of those you buy from on an open account)

Name \_\_\_\_\_ Name \_\_\_\_\_

Phone \_\_\_\_\_ Phone \_\_\_\_\_

Fax \_\_\_\_\_ Fax \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

Phone \_\_\_\_\_ Phone \_\_\_\_\_

Fax \_\_\_\_\_ Fax \_\_\_\_\_

### Bank References

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Contact \_\_\_\_\_

Account Numbers: Checking \_\_\_\_\_ Savings \_\_\_\_\_

State of Michigan Sales Tax License Number (If applicable) \_\_\_\_\_

The Tax Exemption Certificate is for the following purpose:

Resale  Non-profit organization  Industrial processing

Signature \_\_\_\_\_

Title \_\_\_\_\_ Phone \_\_\_\_\_