



5663 Balboa Avenue, # 430
San Diego, CA 92111
Customer Service Phone: 888-526-6347
Accounting Fax: (973) 807 5575

CONFIRM BIOSCIENCES BUSINESS CREDIT APPLICATION

Business Name _____
Address _____
City _____ State _____ Zip _____
Contacts (Accounting) _____ (Purchasing) _____
Telephone #(Accounting) _____
Fax # (Accounting) _____ Email Address _____
Telephone # (Purchasing) _____
Tax ID# (TIN) _____
Tax-Exempt Status No _____ Yes _____ Exemption number _____

(Note: Without a number listed above you will be charged sales tax. A tax-exempt form is required)

Trade References: (Can be attached)

Name _____	Name _____
Account # _____	Account # _____
Address _____	Address _____
Phone # _____	Phone # _____
Fax # _____	Fax # _____

Name _____	Name _____
Account # _____	Account # _____
Address _____	Address _____
Phone # _____	Phone # _____
Fax # _____	Fax # _____

Product ordering _____

Projected monthly purchases (in USD) _____

The undersigned authorizes inquiry as to credit information. We further acknowledge that credit privileges, if granted, may be withdrawn at any time.

Signature

Date

FAX COMPLETED FORM TO 973-807-5575 ATTENTION: ACCOUNTS RECEIVABLE