

**MUST BE FILLED OUT COMPLETELY**

Firm Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

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

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

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

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Website: \_\_\_\_\_

### CONTACTS (Any persons authorized to place orders on your account)

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax : \_\_\_\_\_ Email: \_\_\_\_\_  
First Last

2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax : \_\_\_\_\_ Email: \_\_\_\_\_  
First Last

3. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax : \_\_\_\_\_ Email: \_\_\_\_\_  
First Last

4. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax : \_\_\_\_\_ Email: \_\_\_\_\_  
First Last

5. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax : \_\_\_\_\_ Email: \_\_\_\_\_  
First Last

6. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax : \_\_\_\_\_ Email: \_\_\_\_\_  
First Last

7. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax : \_\_\_\_\_ Email: \_\_\_\_\_  
First Last

8. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax : \_\_\_\_\_ Email: \_\_\_\_\_  
First Last

9. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax : \_\_\_\_\_ Email: \_\_\_\_\_  
First Last

10. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax : \_\_\_\_\_ Email: \_\_\_\_\_  
First Last

### BUSINESS INFORMATION

Type of business \_\_\_\_\_ Year established: \_\_\_\_\_

Are you a 501(c)(3) nonprofit?  Yes  No *If so, please submit your Georgia Non-Profit form to us.*

Are you sales tax exempt in Georgia?  Yes  No *If so, please complete and submit a Georgia sales tax exemption form (ST-5).*

Does your business operate in multiple locations?  Yes  No *If so, please provide a list each location's address to ensure accurate labeling/delivery.*

### ORDER COLLECTION PREFERENCES

How do you want to collect your order when completed?  Pick Up  Delivery  UPS Shipping

If you chose delivery or shipping, we will need the order paid in full prior to delivery or shipment. You are welcome to send a check in advance or provide us with your credit card upon the completion of each order. In addition, we are able to store your card on file and charge the card each time an order is completed.

### CREDIT CARD USAGE

Your credit card number will be securely stored in our encrypted software for future use. Once each of my orders are completed, The Print Shop will charge my credit card on file to pay my invoice(s) in full, then email me a "paid in full" invoice for my records.

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Credit Card No.: \_\_\_\_\_ Cardholder's Name: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CVC: \_\_\_\_\_

Billing Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

*\* We accept Mastercard, Visa, American Express and Discover*