

Print Appeal, Inc.

11220 Pagemill Road • Dallas, Texas 75243
Phone 972-699-0100 Fax 972-699-0155 Toll Free Fax 888-756-4544

Sales Tax & Credit Application

BUSINESS INFORMATION

Legal Name of Business _____
Doing Business As _____
Billing Address _____
Shipping Address _____
Telephone # _____ Fax # _____
Website _____ Email _____

Legal Structure Corporation Partnership Proprietorship
Number of locations _____ Annual Sales _____ Yrs. In Bus. _____

PERSONAL INFORMATION

Owner's Name _____
Home Address _____
Home Phone _____

Officer's Name & Title _____
Home Address _____
Home Phone _____

Officer's Name & Title _____
Home Address _____
Home Phone _____

Type of Business _____

CREDIT REFERENCES

Please indicate below at least three vendors and related account numbers with whom you have open credit:

VENDOR	ACCOUNT #	PHONE #
_____	_____	_____
_____	_____	_____
_____	_____	_____

MULTI-JURISDICTION EXEMPTION CERTIFICATE

Note: Check applicable state laws for authority to issue this certificate for the uses indicated below. Review national tax reporting service publication about the states that honor this certificate.

Purchaser: _____

Address: _____

I hereby certify that I am a:

Wholesaler of: _____

Retailer of: _____

Other: _____

And am registered in the following cities or states:

City or State _____ Tax I.D # _____

City or State _____ Registration Number _____

The tangible personal property described below which I am purchasing from:

**Print Appeal, Inc.
11220 Pagemill Road, Dallas, Texas 75243**

Will be for wholesale, resale or as ingredients or component parts of a new product to be resold, leased or rented in the normal course of my business.

Description of property purchased with this exemption certificate:

Printed napkins, coasters, matches, playing cards, cups and koozies.

I further certify that if the property purchased with this certificate is used or consumed so as to make it subject to sales or use tax, I will pay the tax due directly to the proper taxing authority or inform the seller to add tax to the billing. This certificate shall be a part of each order that I may give you in the future and is valid until cancelled by me in writing or revoked by the city or state.

Under penalties of perjury, I swear or affirm that the information on this form is true and correct as to every material matter.

Authorized Signature: _____ Date: _____

THIS CERTIFICATE IS NOT VALID UNLESS COMPLETED IN ITS ENTIRETY.

Please return fax to (972) 699-0155 ***Thank You!**