



**INK4LESS CREDIT APPLICATION**  
(for Education, Government & Military Accounts)

Ink4Less Accounting: 888-488-4465 x420

Email application to [acctg@ink4less.com](mailto:acctg@ink4less.com) or fax to 1 (503) 575-3735

ORGANIZATION CONTACT INFORMATION			
Organization name:			
Requester name:		Title:	
Phone:	Fax:	E-mail:	
Web address:			
PRIMARY BILLING INFORMATION			
Billing contact:		Title:	
Phone:	Fax:	E-mail:	
Address:			
City:		State:	ZIP Code:
SHIPPING INFORMATION			
<b>Shipping 1:</b>			
Name:		Title:	
Address:			
City:		State:	ZIP Code:
<b>Shipping 2:</b>			
Name:		Title:	
Address:			
City:		State:	ZIP Code:
<b>Shipping 3:</b>			
Name:		Title:	
Address:			
City:		State:	ZIP Code:
<input type="checkbox"/> Check if you will have additional shipping locations			
AGREEMENT			
<ol style="list-style-type: none"> <li><b>ALL net term orders require a signed Purchase Order including a unique PO#, or they will be declined.</b></li> <li><b>Net terms apply to \$150-plus purchases;</b> we accept all major credit cards for orders less than \$150.</li> <li>Invoices must be paid within 30 days from the date of the invoice.</li> <li>Claims arising from invoices must be made within 14 business days.</li> <li>By submitting this application, you authorize Ink4Less to make inquiries into the organization background and/or trade references.</li> </ol>			
SIGNATURES			
Signature:		Signature:	
Print name: _____		Print name: _____	
Title:		Title:	
Date:		Date:	