

BUDEKE'S PAINTS
CASH ACCOUNT INFORMATION SHEET

Please submit form to: 418 South Broadway, Baltimore, MD 21231 or Fax (410) 732-3299 or Email contact@budekes.com

******* This form must be filled out completely in order to be processed. *******

Date: _____ Store 1 3 Clerk Initials: _____

Your Name: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Tax Exempt: Yes No Exemption #: _____ **PLEASE SUPPLY COPY OF TAX EXEMPTION CERTIFICATE**

Work Phone: _____ Home Phone: _____

Fax: _____ E-Mail: _____

Driver's License #: _____ **(REQUIRED FOR CHECK PAYMENTS)**

Credit Card Type: Visa MC AmEx Card # _____

Exp. Date: _____ Vin#: _____

(REQUIRED FOR PHONE ORDERS)

I authorize Budeke's to charge the above credit card for phone sales not picked up within 30 days of order date and not otherwise paid.

Customer's Signature

Which Budeke's location would you prefer? Fells Point or Timonium

Estimated Monthly Purchases: _____

Number of Employees: _____

Had the customer ever used Budeke's before? Y N

Any Special needs, i.e. Sundries, Spray, Tech Info, Job Pricing, etc. _____

Customer Type: (Circle one that best applies)

- | | |
|---|-----------------------------------|
| 1. Government | 6. Woodworking |
| 2. Industrial / Maintenance | 8 Contractor (CG, Painting, etc.) |
| 3. Institutional (Schools, Hospitals) | 9. Faux Finisher |
| 4. Miscellaneous (Not in any other types) | H Homeowner |
| 5. OEM | S Specifier |

Description of business (i.e.General Contr, Painting Contr, Handyman, etc.): _____

STORE USE ONLY

P/L R Matrix 1 2 3 (Subject to approval of Sales Manager/Operations Manager)

Outside Salesman: _____ Acct #: _____