



REAL'S FISHING SUPPLY

Home of Wright Baits

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www.realfishingsupply.com

Wholesale Account Application

*This application must be completed before you can open a wholesale account.

**Copies of your Business License and/or Resale Certificate must be provided.

Business Name _____

Address: _____

Mailing Address: _____

Phone: _____ Fax: _____

Email: _____

EIN #: _____

State Sales Tax ID #: _____

Owner's Information

Name: _____

Address: _____

Phone: _____

The undersigned certifies that the wholesale information provided is true and correct.

Signature: _____

Date: _____