



Tele #918-227-9995

## CUSTOMER INFORMATION FORM

Please complete the following information

### BUSINESS INFORMATION

LEGAL NAME \_\_\_\_\_

TELEPHONE \_\_\_\_\_ FAX NUMBER \_\_\_\_\_

BILL TO ADDRESS \_\_\_\_\_

CITY/STATE /ZIP \_\_\_\_\_

SHIP TO ADDRESS (if different from above) \_\_\_\_\_

CITY/STATE \_\_\_\_\_

TYPE OF BUSINESS \_\_\_\_\_ INDIVIDUAL \_\_\_ PARTNERSHIP \_\_\_ CORPORATION \_\_\_

If a Medical Customer, a copy of your Pharmacy, EMT or Veterinary-license must be faxed to: (918) 227-9994

*I am tax exempt!*

If Tax Exempt, please check the above statement. A copy of your State Sales Tax permit must be faxed to: (918) 227-9994

**Note: any special requirements for billing and/or deliveries.**

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We appreciate the opportunity to serving you.

Please return to: O2 for U, Inc (fax: 918-227-9994)