BULLINGTON ASSOCIATES
New and Refurbished
Physicians' Office Equipment

# NEW ACCOUNT INFORMATION

BILL TO: _____ SHIP TO _____

_____ _____

_____ _____

_____ _____

_____ _____

County: _____

Scheduled Opening Date:_____

Physicians' Name(s)_____ Practice/Facility Phone No.:_____

_____ Practice/Facility Fax No.:_____

_____ A/P Contact:_____

_____ Email:_____

_____ Sales Tax Exempt: Yes_____No_____

_____ (If "yes", exemption certificate must be attached)

TERMS & METHOD OF PAYMENT: Please check box below:

( ) C.O.D. on our delivery truck

( ) PREPAID

( ) 25% DOWN & BALANCE ON DELIVERY

( ) PURCHASE ORDER NUMBER (Attach copy of Purchase Order)

( ) OPEN ACCOUNT: Net 10 (Please complete information below)

Name of Owner/Officer: _____ Name of Bank:_____

Year Business Started:_____ Account #:_____

Contact:_____

Phone Number:_____

Fax Number:_____

List 3 Credit References:

| | | |
|---|---|---|
| Name:_____ | Name:_____ | Name:_____ |
| Acct: #_____ | Acct: #_____ | Acct: #_____ |
| Contact:_____ | Contact:_____ | Contact:_____ |
| Phone:_____ | Phone:_____ | Phone:_____ |
| Fax:_____ | Fax:_____ | Fax:_____ |

*4240 N. Blackstock Rd., Spartanburg, SC 29301 Phone: 864-574-7179 Toll Free: 866-574-7179*
*Fax: 864-587-6634*