

Email Address:

New Commercial Client Application

Labels Master Printing and Packaging
132 Jardin Drive- Unit 8, Concord, Ontario L4K1X9
Tel: 1(855) MR LABEL or (416) 567-2235 www.labelsmaster.com info@labelsmaster.com

COMPANY INVOICE / BILL TO INFORMATION PLEASE PROVIDE E-MAIL ADDRESS THAT YOU WOULD LIKE TO RECEIVE YOUR INVOICES **Business Name: Postal Code:** Address: City: Prov: Attention: **Position:** Phone: Fax: **Email Address: COMPANY SHIP TO / RECEIVING INFORMATION** Name: **Postal Code:** Address: City: Prov: Attention: **Position:** Phone: Fax: **Email Address: BANK INFORMATION Branch Contact:** Bank ID: **Phone Number:** Transit #: Address: Account #: **TRADE REFERENCE #1** Name: **Postal Code:** Prov: City: Address: Phone: **Attention: Position:** Fax: **Email Address: TRADE REFERENCE #2** Name: **Postal Code:** Prov: Address: City: Phone: Attention: **Position:** Fax:

PLEASE MAKE SURE ALL FORM FIELDS ARE COMPLETED AS REQUIRED

Please return completed form to info@labelsmaster.com