



# www.CAMGIFTS.coop CLIENT CREDIT APPLICATION

9221 Flint • Overland Park, Kansas 66214 • 913-381-6596 • fax 913-381-7139

Guaranteeing payment for:

Company Name \_\_\_\_\_

C.A.M. Inc. sincerely appreciates your business and makes every effort to provide convenient credit terms. As a general policy, however, most of our accounts are opened on a pre-pay for first order basis. Your assistance in providing complete data will allow us to make a more accurate assessment of your firm's financial ability and set up your account with proper information. Please complete this application in full and return by mail or fax or e-mail to [accounts@camgifts.coop](mailto:accounts@camgifts.coop).

Using open account status on the site requires use of "Direct Billing Code" on the Checkout Screen. Once approved, you will receive detailed instructions via e-mail.

To place an order without providing a credit card, while we process your application, enter "CREDIT APP" in the PO field on the Checkout Screen. (Order will be ON HOLD until approved)

RUS# \_\_\_\_\_ Type of Business: Corporation \_\_\_\_\_ Privately Held \_\_\_\_\_ Publicly Held \_\_\_\_\_ Partnership \_\_\_\_\_ Sole Proprietor \_\_\_\_\_

Company Name \_\_\_\_\_ dba \_\_\_\_\_

Main Office \_\_\_\_\_ City/State \_\_\_\_\_

Physical Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Building Facility: Owned \_\_\_\_\_ Leased \_\_\_\_\_ Years in business? \_\_\_\_\_ Years at this location? \_\_\_\_\_

Billing Location (if different) \_\_\_\_\_

Shipping Location (if different, please attach a list of additional shipping locations) \_\_\_\_\_

Accounts Payable Contact(s) \_\_\_\_\_ Direct Line/Extension \_\_\_\_\_

Do you require purchase orders? Yes \_\_\_\_\_ No \_\_\_\_\_ Tax I. D. Number \_\_\_\_\_  
KS & MO locations will be billed Tax unless CAM has an exemption certificate on file.

Special Billing Instructions: \_\_\_\_\_

Principals \_\_\_\_\_ Principals \_\_\_\_\_

Title \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Phone # \_\_\_\_\_

Social Security# \_\_\_\_\_ Social Security# \_\_\_\_\_

\*Authorized Purchaser(s): \_\_\_\_\_ Login ID#: \_\_\_\_\_ Password: \_\_\_\_\_ E-mail Address: \_\_\_\_\_ Direct Line/Extension: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*Current Login of RUS#/Zip Code will be changed for security.



**BANK REFERENCE:**

1. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 Account Numbers \_\_\_\_\_  
 Contact \_\_\_\_\_

**LANDLORD/MORTGAGE HOLDER:**

1. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 Account Numbers \_\_\_\_\_  
 Contact \_\_\_\_\_

**TRADE REFERENCES:**

1. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 Account Numbers \_\_\_\_\_  
 Contact \_\_\_\_\_

2. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 Account Numbers \_\_\_\_\_  
 Contact \_\_\_\_\_

3. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 Account Numbers \_\_\_\_\_  
 Contact \_\_\_\_\_

4. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 Account Numbers \_\_\_\_\_  
 Contact \_\_\_\_\_

5. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 Account Numbers \_\_\_\_\_  
 Contact \_\_\_\_\_

6. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 Account Numbers \_\_\_\_\_  
 Contact \_\_\_\_\_

7. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 Account Numbers \_\_\_\_\_  
 Contact \_\_\_\_\_

8. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 Account Numbers \_\_\_\_\_  
 Contact \_\_\_\_\_