

## ABADATA COMPUTER CORPORATION, INC.

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CREDIT APPLICATION		
Legal name:		
DBA:		
Street address:		
City, State, Zip:		
Phone number:		Fax number:
Contact name and e-mail address:		Web-Site:
Date and state of incorporation:		Sales Rep:
Sole Proprietorship:		Corporation:
BANKING INFORMATION		
Bank name:		
Bank address:		
Contact name and phone number:		Fax number:
BUSINESS REFERENCES		
Company name:		
Company address:		Account#:
Contact name and phone number:		Fax number:
Company name:		
Company address:		Account#:
Contact name and phone number:		Fax number:
Company name:		
Company address:		Account#:
Contact name and phone number:		Fax number:
All customers must provide valid credit card number or ACH information, via the ACH/Credit Debit Card Authorization Form, to obtain credit with Abadata Computer Corporation, Inc.		
AGREEMENT		
All invoices more than 30 days past due may be change. Your signature on this application authorizes Abad		
Name (Printed)	Signature	 Date