

**CMO ENTERPRISES, INC.**  
**113 TOWNE LAKE PARKWAY, SUITE 120**  
**WOODSTOCK, GA 30188**  
**PHONE: (770) 928-2860 FAX: (770) 928-3241**

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**Date:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_  
**To:** \_\_\_\_\_ **Fax:** \_\_\_\_\_  
**From: Kathy Higgins/Carol Bullard** **Pages Sent: 3**

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Thank you for your interest in doing business with CMO Enterprises, Inc. Please find attached our Credit Application. **Please fill out and have appropriate party sign the last page** (if you have preprinted credit information, you may fax this in lieu of filling out the information on page one of our Credit Application.

**WE MUST HAVE THE FOLLOWING INFORMATION IN ORDER TO PROCESS YOUR CREDIT APPLICATION:**

- 1. INCLUDE COPY OF TAX EXEMPT CERTIFICATE IF YOU ARE TAX EXEMPT**
- 2. IF YOU ARE NOT TAX EXEMPT, COUNTY YOU ARE LOCATED IN \_\_\_\_\_**
- 3. INCLUDE YOUR BANK ACCOUNT NUMBER**
- 4. BE SURE TO INCLUDE FAX NUMBERS FOR ALL CREDIT REFERENCES**
- 5. HAVE THE LAST PAGE SIGNED. WE MUST HAVE THIS AUTHORIZATION.**
- 6. WILL YOU ACCEPT EMAILED ORIGINAL COPY OF INVOICES?**  
**EMAIL ADDRESS TO SEND INVOICES TO \_\_\_\_\_**
- 7. RETURN THIS LETTER WITH YOUR CREDIT INFORMATION**

Orders will be shipped as soon as responses are received from your credit references. We at CMO look forward to servicing your packaging needs.

Regards,

Kathy Higgins

creditapfaxkathy

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**CONFIDENTIAL CREDIT APPLICATION**

Company Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Billing Address: \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

City/State: \_\_\_\_\_

Zip: \_\_\_\_\_

Shipping Address: \_\_\_\_\_

City/State: \_\_\_\_\_

Zip: \_\_\_\_\_

Proprietorship \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_ Date Incorporated: \_\_\_\_\_

Type of Business or Product Service: \_\_\_\_\_

Sales Tax I.D. #: \_\_\_\_\_ Fed I.D. #: \_\_\_\_\_

(Attach Exemption Certificate)

**Purchase Order Required? Yes \_\_\_\_\_ No \_\_\_\_\_ Credit Limit Requested: \_\_\_\_\_**

**Credit References – Major Suppliers**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

**Bank References:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Account# \_\_\_\_\_ City/State: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

I hereby authorize CMO Enterprises, Inc. to obtain credit information from the cited references for the sole purpose of establishing payment terms with said company. It is understood that if my application is determined to be credit worthy, I hereby agree to abide by the published payment terms of CMO Enterprises, Inc.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Title: \_\_\_\_\_

Company: \_\_\_\_\_

creditpcmo