

# Account Setup Form

JP Sales Inc.

3030 Old Glenview Road  
Wilmette, IL 60091

Telephone: 847-251-6342

Fax: 847-251-4003

Date: \_\_\_\_\_

Tax Exempt/Resale Number: \_\_\_\_\_

**Please Fill This Out and  
Email or Fax it to Us**

## Billed To:

Company or  
School Name: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

e-mail: \_\_\_\_\_

# of Students: \_\_\_\_\_

Account Payable Name: \_\_\_\_\_

Account Payable Phone: \_\_\_\_\_

Same as Billing

## Ship To:

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

We may need to use this as your shipping label; please print clearly.

## Three Credit References:

#1 Company  
Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Account #: \_\_\_\_\_

#2 Company  
Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Account #: \_\_\_\_\_

#3 Company  
Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Account #: \_\_\_\_\_

## Items You Store is Interested In (optional):

T-Shirts  School Bags

Long Sleeve  Rolling Bags

Sweatshirts/Hoodies  Uniform

Fleece  Other: \_\_\_\_\_