



EASY BILLING CREDIT APPLICATION

Fax to : 760-454-2494

Account Profile

Organization Name _____

Address to Invoice _____

City _____ State _____ Zip _____

Phone _____ FAX to Invoice (required) _____

Date Established: _____ Website Address: _____

Email to Invoice _____ Invoice Contact Name: _____

Names of account administrators: 1) _____ 2) _____

Administrator(s) have the right to purchase as well as add or delete other purchasers from the authorized list.

Names of authorized purchasers (Only those listed will be allowed to place orders with Easy Billing):

1) _____ 2) _____ 3) _____

4) _____ 5) _____ 6) _____

Attendance, if church () up to 100 () 100 to 250 () 250 to 500 () 500 to 1000 () 1000+

Bank Reference

Bank Name _____

Address _____

City _____ State _____ Zip _____

Account # _____

Officer _____ Phone # _____

The information contained herein is confidential and is true. All forms and signatures must be completed.

Most first time orders are check or credit card payment in advance. These terms will remain in effect until a completed Credit Application Form is received and approved by Outreach, Inc. Outreach, Inc. may hold orders pending receipt of those documents and satisfactory review of the application. Checks returned for insufficient funds or stop payment not authorized by Outreach, Inc. may result in any or all of the following: Cancellation of credit terms, termination of account, liability on applicant for a return check charge of \$30.00 plus Outreach, Inc's reasonable attorney fees as allowed by law. All quotes by Outreach, Inc and payment by the undersigned are to be in U.S. dollars.

Terms

Upon approval, stock orders may be made by phone without any pre-payment. Payment will be due upon receipt. Account will be considered delinquent when any order is unpaid 15 days after invoice date. Account will be put in hold status when any order is unpaid 61 days after invoice date. No orders will be accepted or shipped when an account is in Hold status. Easy Billing orders will only be shipped to the primary church address.

CREDIT APPLICATION FORM – OUTREACH, INC.

Product Return Policy:

A full refund (minus shipping charges) will be given when merchandise is returned within the first 30 days. A return authorization number is required. A 20% restocking fee will be charged on merchandise returned after 30 days.

Statement of Stewardship:

On behalf of our organization I agree to adhere to the above account payment and return requisites.

Name(printed): _____ Signature: _____

Organization Name: _____ Date signed: _____

Title of Authorized Individual (Pastor or Treasurer): _____

For internal use only

OM# _____ Representative _____

Date Processed _____