

CHRISTIAN LIBERTY PRESS

502 West Euclid Avenue, Arlington Heights, Illinois 60004-5402
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A MINISTRY OF THE CHURCH OF CHRISTIAN LIBERTY SINCE 1984

BILLING ACCOUNTS APPLICATION

Revised – February 17, 2022 please print clearly

Company Name		Phone	
Address		Fax	
City	State	Zip	
Shipping Address (if different from above)			
City	State	Zip	
Years in Business	Company is seeking to become a:	Distributor Customer ¹	School-Church Customer ²
Сотра	CONTACT INFORMATION any Directors / Officers / Buyer / Prin	cipal	
Name 1		Title	
Email		Phone	
Name 2		Title	
Email		Phone	
Name 3		Title	
Email		Phone	

continued on next page

¹ Include a copy of your resale certificate with this application.

² Include a copy of your business certificate and/or your tax-exempt letter with this application.

Vendor 1		Account #	
Payment Address			
City	State	Zip	
Contact Name	Phone	Fax	
Email			
Vendor 2		Account #	
Payment Address			
City	State	Zip	
Contact Name	Phone	Fax	
Email			
Vendor 3	Account #		
Payment Address			
	State		
Contact Name	Phone	Fax	
Email			

Company Name _____ Date ____

TRADE REFERENCES

continued on next page

Company Name	Date			
TERMS AND CONDITIONS FOR NET 30				
Terms of sale (including terms of payment and charges for each purchase) are agreed to be those specified on each invoice. Payment must be made within thirty (30) days of the shipping date and must be in U.S. funds and drawn against a U.S. bank.				
(whichever is greater). Excessive late paymen and privileges (at the discretion of Christian Lib	ay timeframe will incur a service charge of 2% or \$10 its may also result in the loss of your billing account status perty Press). The "Company" (you) hereby agrees to pay all on-payment require such action. The information contained			
creditworthiness of the Company. Should a line	contact the above trade references in order to establish the e of credit be granted to the Company by CLP, all decisions of said line shall be at the sole discretion of CLP. Christian ts sole discretion.			
and understand Christian Liberty Press's generator for Distributor Customers:	and conditions, and hereby agree to them. I have also read ral policies surrounding my customer type as presented—			
for School-Church Customers:	ent/distributors/Distributor%20Policies.pdf>; ent/distributors/School-Church%20Policies.pdf>.			
Applicant's Name	Title			
Company Name				
Authorized Signature	Date			
PERSONAL GUARANTEE				
	ersonally guarantees the full and prompt payment of all by the "Company" (you) with respect to its purchases made			
Guarantor's Name	e Title			
Address				
	State Zip			
Authorized Signature	Date			