

**MARKETING & TECHNICAL MATERIALS, INC.**

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NEW CUSTOMER INFORMATION FORM

Please complete the information below to allow us to set up your new account correctly

COMPANY DETAILS			
Company Name _____			
Mailing Address _____ _____			
Ship to Address _____ _____			
TYPE OF BUSINESS			

PURCHASING CONTACT			
Contact Name _____			
Tel# _____			
Fax# _____			
Email _____			
ACCOUNTS PAYABLE			
Contact Name _____			
Tel# _____			
Fax# _____			
Email _____			
Preferred Payment Method		NET 30 - CHECK or CREDIT CARD :	Securley Saved Provide with order
PREFERRED INVOICING METHOD			
EMAIL ONLY (MtM Default)	MAIL ONLY	BOTH	
EMAIL FOR INVOICES	As A/P above or	Other _____	
PREFERRED SHIPPING METHOD			
UPS & ADD TO BILL or	Ship collect on your UPS Acct# _____		
COURIER	WILL CALL	OTHER _____	
MACHINES USED - Please list make & model			
Color Copier	_____		
Ink Jet Printer	_____		
Solvent Printer	_____		