



To: Fixez.com
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Las Vegas, NV 89120
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support@fixez.com

From Name
Address
City, State & Zip
Phone & Fax
Email

Business Type: ☐ Sole Proprietor ☐ Partnership ☐ Corporation State: _____

Years in business: _____ Tax ID #: _____

Name, Title, Phone, and Email of Individuals or Partners	-or-	Name, Title, Phone, and Email of Corporate Officers
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.....		
.....		

Person to Contact Regarding Purchase Orders and Invoices: Name, Title, Address, Phone, and Email
.....
.....

Bank References: Branch, Address, Contact w/Title, and Phone Number
.....
.....

Trade References: Company Name, Address, Contact w/Title, and Phone Number
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Name: _____ Title: _____
Signature: _____ Date: _____