



CUSTOMER SETUP FOR PREPAYMENTS (Credit Card, Certified Check, PayPal or Wire)

PLEASE COMPLETE, SIGN AND RETURN THIS FORM:
ACCTG@TELEXPRESSINC.COM OR FAX 336-431-3813
IF YOU HAVE QUESTIONS CONCERNING THIS FORM, PLEASE CONTACT ACCTG@TELEXPRESSINC.COM OR 336-431-4000 EXT 241

BILLING/SHIPPING INFORMATION

Legal Business Name as Registered DBA (Doing Business As)
Shipping Address (No PO Boxes) Billing Address (If Different)
City State Zip City State Zip
Phone Number Landline Cell Phone Fax Number

BUSINESS INFORMATION

Check One: Individual Corporation Partnership LLC Subsidiary or Division of:
Type of Business Company Website
Is Your Company Tax Exempt? Resale Certificate Number(s) Current Sales Tax Rate
Provide Copy of Certificate(s)

(IN ORDER FOR US TO SELL ANY ITEMS ON A TAX EXEMPT BASIS, WE MUST HAVE A FULLY EXECUTED RESALE FORM ON FILE)

Authorized Purchaser Email Address of Authorized Purchaser Purchaser Phone Number
Accounts Payable Contact Name Accounts Payable Contact Email Address Accounts Payable Phone Number

PAYMENT INFORMATION

Payment Method Credit Card Wire PayPal Certified Check
Card Number Expiration Date Security Code
Type of Card: Visa MasterCard Amex
Card Holder Name
Card Holder's Billing Address (as it appears on credit card statement)

I hereby authorize the use of the above listed Credit Card for payment to TelExpress, Inc:

For This order ONLY For this order and all future orders or until TelExpress is notified in writing to cancel authorization

Authorized Signature Title
Printed Name Date

Prepared By Internal Use Only Website