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NEW ACCOUNT SET UP FORM

Bill to Name:	Terms (Circle One):	COD	NET 30	CARD
Address:	Resale/Tax Exempt:	Y	N	
City, State, Zip:	Attach Tax Forms			
Phone:	Invoice Preference:	Delivery	PAPER	EMAIL
Fax:	Email Order Confirmations:	Y	N	
Invoice Email:	Order Confirmation Email:			
CC INV Email:				

Office Contact:	Sales Contact	AR Contact:
First Name:	First Name:	First Name:
Last Name:	Last Name:	Last Name:
Email:	Email:	Email:
Phone:	Phone:	Phone:

Ship to Locations (Contacts/Notes):

For Resale – please include completed form:
<https://comptroller.texas.gov/forms/01-339.pdf>

Backorders	Deliver	Cancel
Substitutes Allowed if out of Stock?	Y	N

<u>INTERNAL USE</u>	
Rep:	Delivery Route:
Track Ship To History/Usage Separately:	Pricing on Shipping Docs
MKT Group:	Fuel:
PMT/PRIC Group:	Credit Lim:
Purchasing Notes (Product/Usage info):	

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