

#### TRA DE/ C REDIT REFERENC ES VERIFICATION A UTHO RIZATION FORM

# This Section is to be completed by Customer's authorized agent: Company Name: Address: \_\_\_\_\_ Phone No: \_\_\_\_\_ City, State, Zip Code: \_\_\_\_\_\_ Fax No: \_\_\_\_\_ Trade Reference Company Name: Address: Phone No: City, State, Zip Code: \_\_\_\_\_ Fax No: \_\_\_\_ The undersigned hereby authorizes the release of trade/credit information for the purpose of purchasing merchandise from Athena Computer Power Corp. Signature of Authorized Agent: Name of Authorized Agent: Title: Date: This Section is to be completed by Trade Reference authorized agent: Date account opened: \_\_\_\_\_ Credit Limit: \_\_\_\_ Curent Balance: \_\_\_\_ To tal Sales since Account Opened: \_\_\_\_\_ Date of Last Sale: \_\_\_\_\_ Tem: Cash Cashier's COD Company Check Net\_\_\_\_\_\_Net\_\_\_\_\_ Pa st Due :\_\_\_\_\_ Days Past Due: Bank NSF: Yes No Amount of NSF check: Replaced: Yes Payment History: On Time Occasionally Late Frequent Late Payment Overall Rating on Payment History: \_\_\_\_ Satisfactory \_\_\_\_ Unsatisfactory Additional Comment:

Ple ase send by fax to 626-810-5555 ACPC, Attn. Credit Dept. 1210 John Reed Court, City of Industry, CA 91745 oremail to info@athenapower.us

Send via Email



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