



ALPHA MEMORY, INC.
CREDIT APPLICATION FORM
GOVERNMENTAL AGENCIES / CONTRACTORS
AND EDUCATIONAL INSTITUTIONS
 5307 North McColl Road, McAllen, Texas 78504-2044
 Tel: 956.618.3323 Fax: 956.971.8595
 eMail : credit@alphamemory.com

BILLING		
Company/Institution/Agency Name	Telephone #	
Division/Department Name	Fax #	
Billing Address 1	Federal Tax ID #	
Billing Address 2	eMail Address	
City	State	Zip

PURCHASING	
Contact 1 (Name)	eMail Address
Phone No	Fax Number
Contact 2 (Name)	eMail Address
Phone No	Fax Number
Contact 3 (Name)	eMail Address
Phone No	Fax Number
Contact 4 (Name)	eMail Address
Phone No	Fax Number
Contact 5 (Name)	eMail Address
Phone No	Fax Number

ACCOUNTS PAYABLE	
Contact (Name)	eMail Address
Phone No	Fax Number

Classification <input type="checkbox"/> Federal Government <input type="checkbox"/> State Government <input type="checkbox"/> Local Government <input type="checkbox"/> Contractor For Govern. <input type="checkbox"/> Educational
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All Purchase Orders must include the above billing and purchasing contact information. If any of the information changes please notify us to avoid any delays on shipment. Any Purchase orders placed by persons not authorized by this application will not be processed.

The Purchase Orders should clearly state the shipping address and the Name/Department receiving the shipment.

The Purchase Orders can be faxed to 956.971.8595 but the original should be mailed to Alpha Memory, Inc.

The undersigned certifies that all information in this credit application is complete, factual and correct, and understands the supplier will rely on the accuracy of this information for any credit that may be extended.

Name and title of Authorized Person	Authorized Person's Signature	Date