

Please return this form to
accounting@sayesoffice.com
or fax to 318.448.4171.



7603 Highway 71 South Alexandria, LA 71302
Office: (318) 448-4225 Fax: (318) 448-4171
accounting@sayesoffice.com

For Office Use Only

Account#: _____

Sales Rep: _____

Date: _____

Contract: _____

CREDIT APPLICATION

Name: _____

Phone #: _____ Fax #: _____

Email Address: _____

Shipping Address: _____

City: _____ State: _____ Zip: _____

Accounts Payable Contact Person: _____ Phone #: _____

Accounts Payable Email Address: _____

P.O. Required: YES NO

File Sales Tax with _____ Parish/County

City Limits: Inside or Outside

Sales Tax Exemption: YES or NO (if yes, include a copy of the signed certificate)

Sales Tax Exempt # (if applicable) _____

CREDIT CARD INFORMATION (REQUIRED)

Type of Credit Card: MASTERCARD VISA AMERICAN EXPRESS DISCOVER

Name on Card: _____ Expiration: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Credit Card #: _____ Security Code: _____

Email Address for Credit Card Receipts: _____

WEB USER INFORMATION

User Name: _____ User Name: _____

Email Address: _____ Email Address: _____

Delivery Address: _____ Delivery Address: _____

PLEASE EMAIL THIS COMPLETED FORM TO ACCOUNTING@SAYESOFFICE.COM

Please Note: If your delivery area is outside of Central Louisiana, a credit card is required to establish an account. Products ship ground and shipping charges are added to the invoice when the product ships. Hazardous materials including, but not limited to chemical products cannot be shipped. Merchandise that is shipped is not eligible for return. If you have any questions, please contact customer service at 318.448.4225.

Please save this file to your computer and email it to:
accounting@sayesoffice.com or fax it to 318.448.4171

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