

GP Laboratories

PO BOX 29723
SAN ANTONIO, TX 78229-0723

WHOLESALE ACCOUNT APPLICATION

Please fill out completely

Company Name _____

Shipping Address _____

City _____ State _____ Zip _____

Billing Address (if different from shipping address) _____

City _____ State _____ Zip _____

Phone Number _____ Fax Number _____

Email _____ Website _____

Resale License Number (see notice below) _____

What is the primary nature of your business at this location?

Health Food Store Mail Order Firm Export Other (describe) _____

TYPE OF BUSINESS:

Sole Proprietorship – Social Security No.: _____

Corporation – Partnership – FEIN No.: _____

Other (describe) _____

Is your business/store a subsidiary of any corporation or other entity? YES NO

If yes, list full name and address of operation: _____

How did you learn about GP Laboratories and our products? (advertisement, internet search, etc.)

Contact Person / Title	Name (print)	Signature	Date

Payment Information: We currently accept the following payment methods: Approved Business Check, Money Order, Visa, MasterCard, Discover and American Express. We also offer Net 30 accounts with established credit.

IMPORTANT

State sales and use tax laws require us to obtain a completed resale tax exempt certificate form and a copy of your retailer's sales or use tax certificate for those states which impose sales tax.

PLEASE FILL OUT THE FORM AND FAX ALL DOCUMENTS TO TEXPOL ENTERPRISES, LLC:
(775) 593-1907