

**CUSTOMER MASTER FILE**

<b>Office Use Only</b>	
Customer #	_____
Service Center	_____
Open Date	_____

**BILLING INFORMATION**

Company Name

Address

City

State

Zip

Country

Phone

Fax

AP Contact

AP Email

Invoice delivery preference      Email      Mail (USPS)

Purchase Orders Required      Yes      No

Sales Tax Exemption      Yes      No

(If yes, please complete and include a Sales Tax Exemption Certificate with this form)

**SHIPPING INFORMATION**

Check if same as Billing Information

Company Name

Ship to Address

City

State

Zip

Country

Phone

Fax

Service Manager

Email

**TYPE OF BUSINESS**

Custom Applicators      Farmer      Fertilizer Dealer      Grain Elevator      Independent Repair Shop

Farm Implement Dealer (      AGCO      CNH      John Deere      Other      )

Municipality      Precision Farming Dealer      Other

*Thank you for using Ag Express Electronics!*