

A Division of SRS Distribution Inc.

COD NEW ACCOUNT REQUEST

COMPANY NAME			
MAILING ADDRESS		CITY	STATE / ZIP
STREET ADDRESS			
PHONE NUMBER	CELL/MOBILE	CITY FAX	STATE / ZIP
SALES TAX EXEMPTION CERTIFICATE	□ YES (IF YES, PLEASE	E INCLUDE SIGNED CERTIFICA	TE OR COPY) D NO
TYPE OF ENTITY: CORP. PARTNERSHIP	PROPRIETORSHIP INDIVIDU	JAL 🗌 LLC 🗌 YRS EST	_
(COD AC	COUNT	
All checks issued to SRS and its subsidiarie	es will be verified by United 1	 FranzActions	
The Customer identified above hereby apterms on all invoices are Cash on Delivery (N.S.F.) and/or Returned Checks. A servi annum may be assessed on delinquent invand/or invoice date) is, but not to exceed SRS Distribution Inc. are payable at 5900 agreement is entered into in the State of according to the laws of Texas. In the collection, the undersigned agrees to pay person executing this agreement has the Delivery (C.O.D.) application terms and con	(C.O.D.). The maximum co- ice charge of one-and-one—h- roices (as defined by one day at any time, the highest rate South Lake Forest Drive, Sui Texas, Collin County. These event of default, and if thi all reasonable attorneys' fe- authority to bind the custom	llection fee by law will be charged alf percent (1-1/2%) per month of after receipt of the product as extended in the product as extended and the second all and the second and conditions of sale shales account is turned over to an ages, and/or costs of collection who	d for any Non-Sufficient Funds or eighteen percent (18%) per videnced by a proof of delivery nounts due for purchases from is further understood that this I be construed and interpreted gency and/or an attorney for ether or not suit is filed. The
COMPANY NAME:			
Print Name	Signature		Date
Print Name	Signature		Date
Branch Manager Signature		River City Wholesale – Territory M	Aanager/Branch