

# SPUNSTRAND INC.

620 North Post Street Post Falls, ID 83854 208.777.7444 p 208.777.7445 f

## NEW CUSTOMER CONTACT INFORMATION

Your Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Sub. Of: \_\_\_\_\_

Credit or A/P Contact: \_\_\_\_\_

Phone # of Credit or A/P Contact: \_\_\_\_\_

Email of Credit or A/P Contact: \_\_\_\_\_

Please fax completed form to 208.777.7445 - Thank you!

Date Spunstrand Received: