

OUR REMIT TO ADDRESS:
DIEMOULD SERVICE COMPANY
1875 BLACKACRE DRIVE
OLD CASTLE, ONTARIO, N0R 1L0
P-(519)734-6743 OR 1-800-265-4885
F-(519)737-6744 OR 1-800-845-3807
WWW.DMSCOMPONENTS.COM



DATE _____

FULL COMPANY NAME _____

MAILING ADDRESS:

SHIPPING ADDRESS:

ZIP CODE: _____

ZIP CODE: _____

PHONE #: (____) - ____ - _____

FAX #: (____) - ____ - _____

INCORPORATED (x):

YES _____ NO _____

CREDIT AMOUNT REQUIRED: _____

FEDERAL ID #: _____

INVOICE PREFERENCE (x):

MAIL ___ E-MAIL ___

IF SHIPPING ON CUSTOMER ACCOUNT:

CARRIER: _____

ACCOUNT #: _____

CONTACTS

A/P - _____ (NAME)

_____ (E-MAIL)

PURCHASING - _____ (NAME)

_____ (E-MAIL)

STANDARD TERMS: N/30

IT IS UNDERSTOOD AND AGREED THAT ALL INVOICES WILL BE PAID WITHIN THE TERMS, NET 30

REFERENCES

NAME
ADDRESS
CITY
PROV./STATE
POSTAL/ZIP
CODE
PHONE
FAX/E-MAIL

