



# Term Account Application Form

Gorilla Paper Inc  
 1125 Lunt Ave  
 Elk Grove Village, IL 60007  
 P: 773-789-8113  
 F: 773-231-2809

Please return completed application to the email address: [pav@gorillapaper.com](mailto:pav@gorillapaper.com) or fax to 773-231-2809

Business Information		Default Shipping Address info	
Business Name		Business Name	
Accounts Payable Contact		Receiving Date / Hours	
AP Email / Telephone		Street Address	
Street Address		City, State, ZIP	
City, State, ZIP		Purchaser Name	
Federal Tax ID		Purchaser Phone / Email	
DUN#		Loading Dock or Forklift	Yes / No

Bank Reference Information			
Bank Name		Street Address	
Telephone		City, State, ZIP	
Fax		Account number	

Annual Demand				
Estimate Product Distribution Method	Ground package ____% LTL( Less than Truckload )____ % FTL( Full truck load )____ %			
SKU:	Qty:	/YEAR	Amount:	/YEAR
				Current Vendor:
SKU:	Qty:	/YEAR	Amount:	/YEAR
				Current Vendor:
SKU:	Qty:	/YEAR	Amount:	/YEAR
				Current Vendor:

Trade References		
Company Name: Contact Person:	Telephone: Fax:	Street Address: City/State/Zipcode:
Company Name: Contact Person:	Telephone: Fax:	Street Address: City/State/Zipcode:

**Payment Terms: Upon Approval** All accounts are due and payable within terms after receipt of merchandise. A finance charge of 1.5% per month will be added on all invoiced amounts outstanding from date of invoice. The business relationship between Gorilla Paper Inc and the customer shall be governed by the laws of the State of Illinois. Buyer solely is responsible for all sales taxes on orders shipped to states outside of Gorilla Paper's nexus States. All disputes between Gorilla Paper Inc and the customer shall be decided by the Local State or Federal courts of competent jurisdiction in the State of Illinois. Purchaser agrees to pay reasonable attorney's fees and other costs at time of collection.

I CERTIFY THE ABOVE INFORMATION IS CORRECT AND THAT WE CAN AND WILL COMPLY WITH YOUR TERMS.

Signature of Company Officer / Authorized Representative X \_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

# Sales Tax Certificate of Exemption

I, the undersigned purchaser, certify that I am engaged in the business of \_\_\_\_\_  
\_\_\_\_\_ and that the tangible personal property described below, which I shall purchase from

*Gorilla Paper Inc  
1125 Lunt Ave  
Elk Grove Village, IL 60007*

is exempt for the following reason (check one):

- Purchaser is an organization organized and operated exclusively for educational or religious purposes.
- Resale exemption -Property purchase will be resold, leased, or rented by the purchaser. Purchaser solely is responsible for all sales taxes.
- Purchaser is a federal or local government agency. (State government purchases may be taxable)
- Other: \_\_\_\_\_

This certificate shall be part of each order the seller, hereafter gives to you, unless otherwise specified and shall continue in force until canceled by us in writing or revoked by the city or state.

Description of property for which exemption is claimed: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Purchaser/Company Name

\_\_\_\_\_  
Address City State Zip

\_\_\_\_\_  
Purchaser's sales and use tax account number (if no number, state reason)

X \_\_\_\_\_  
Signature of authorized purchaser Title Date

\*Please attach any applicable Certificate(s) of Resale or Tax Exemption letter. If shipping to multiple states, an MTC form is required with all ship-to states' resale account ID or seller permit numbers included.

**UNIFORM SALES & USE TAX EXEMPTION/RESALE CERTIFICATE — MULTIJURISDICTION**

The below-listed states have indicated that this certificate is acceptable as a resale/exemption certificate for sales and use tax, subject to the notes on pages 2—4. The issuer and the recipient have the responsibility to determine the proper use of this certificate under applicable laws in each state, as these may change from time to time.

Issued to Seller: GORILLA PAPER INC

Address: 1125 LUNT AVE, ELK GROVE VILLAGE, IL 60007

I certify that:  
 Name of Firm (Buyer): \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

is engaged as a registered  
 Wholesaler  
 Retailer  
 Manufacturer  
 Seller (California)  
 Lessor (see notes on pages 2—4)  
 Other (Specify) \_\_\_\_\_

and is registered with the below-listed states and cities within which your firm would deliver purchases to us and that any such purchases are for wholesale, resale, or ingredients or components of a new product or service to be resold, leased, or rented in the normal course of business. We are in the business of wholesaling, retailing, manufacturing, leasing (renting) selling (California) the following:

Description of Business: \_\_\_\_\_

General description of tangible property or taxable services to be purchased from the Seller: \_\_\_\_\_

State	State Registration, Seller's Permit, or ID Number of Purchaser	State	State Registration, Seller's Permit, or ID Number of Purchaser
AL <sup>1</sup>		MO <sup>16</sup>	
AR		NE <sup>16</sup>	
AZ <sup>2</sup>		NV	
CA <sup>3</sup>		NJ	
CO <sup>4</sup>		NM <sup>4,17</sup>	
CT <sup>5</sup>		NC <sup>18</sup>	
FL <sup>6</sup>		ND	
GA <sup>7</sup>		OH <sup>19</sup>	
HI <sup>4,8</sup>		OK <sup>20</sup>	
ID		PA <sup>21</sup>	
IL <sup>4,9</sup>		RI <sup>22</sup>	
IA		SC	
KS		SD <sup>23</sup>	
KY <sup>10</sup>		TN	
ME <sup>11</sup>		TX <sup>24</sup>	
MD <sup>12</sup>		UT	
MI <sup>13</sup>		VT	
MN <sup>14</sup>		WA <sup>25</sup>	
		WI <sup>26</sup>	

I further certify that if any property or service so purchased tax free is used or consumed as to make it subject to a Sales or Use Tax we will pay the tax due directly to the proper taxing authority when state law so provides or inform the Seller for added tax billing. This certificate shall be a part of each order that we may hereafter give to you, unless otherwise specified, and shall be valid until canceled by us in writing or revoked by thee city or state.

Under penalties of perjury, I swear or affirm that the information on this form is true and correct as to every material matter.

Authorized Signature: \_\_\_\_\_  
 (Owner, Partner, or Corporate Officer, or other authorized signer)

Title: \_\_\_\_\_  
 Date: \_\_\_\_\_