



TC Dental & Medical Supplies, Inc

1271 N. Blue Gum Street
Anaheim, Ca 92806

Tel: (714) 632-7499 FAX: (714) 632-6902

E-Mail: info@tcdentalmedicalsupplies.com

E-Mail: info@starryshine.com

Account Set-Up Form

Company Name: _____ Yr Est'd _____

Address: _____

Phone No.: (_____) _____ Fax No. (_____) _____

Principal / Owner Name: _____ Title _____

Ownership Type: Corporation: _____ Partnership: _____ Sole Proprietor: _____

Federal ID No. _____ Social Security No. _____

State Resale Permit/Certificate No. _____ State of _____

>>>>>>>>>> (Please attach a copy of the certificate herewith) <<<<<<<<<<<<

>>>>>>>>>> (Please attach a copy of City Business License herewith) <<<<<<<<<<<<

Web Site: _____

E-Mail Address: _____

Persons Authorized to Purchase for merchandise

Name _____ Name: _____

>>>> Trade References <<<<

Please provide two reference with whom you have stablished as a distributor

1) Company Name & Address _____

Contact Person: _____ Phone _____ Fax _____

2) Company Name & Address _____

Contact Person: _____ Phone _____ Fax _____