



SPECTRUM
DESIGNED TO PERFORM

Ana B. Gutierrez

Accounts Manager

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20519 Sunshine Ln Suite B. Spring, Tx 77388

T. (833) 3SPK LEO

C. (713) 444 6881

@SPEKTRUM_LEOS

Gym Name: _____

Billing Address: _____

_____ City _____ State _____ Zip

Shipping Address: _____

_____ City _____ State _____ Zip

Buyer Name / Purchasing _____

_____ Phone _____ Fax _____ E-mail

Sales Tax Exempt Yes No

If you are exempt please include a copy of your exemption certificate

Ana Gutierrez
SALESREP

CREDIT LIMIT

TAX ID #: _____ **DUNS #:** _____

Principals:

Names of Officers or Owners: _____

Accounts Payable Contact: _____

_____ Phone _____ Fax _____ E-mail

Approval for electronic Invoices: YES NO

The above information is intended for the purpose of obtaining credit and is warranted to be true. Signature constitutes agreement that any legal action involving this contract or any goods purchased shall only be commenced in Federal or State courts of Texas of proper venue. Customer also agrees that Texas law shall be applied without resort to choice of law rules. A one time late payment fee of \$25.00 will be assessed to invoices not paid by the due date. Commencing on the due date, interest will accrue at the maximum rate authorized by Texas Law.

SIGNATURE TITLE DATE

CREDIT CARD # EXPIRATION DATE CVC #

CUSTOMER PREPAY INFO:

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