## Prime-Vendor, Inc.

4622 Cedar Avenue Suite 123 Wilmington, North Carolina 28403-6916 800 746-1638 fax: 800 746-8307 www.prime-vendor.com

## Please FAX this form back to 1.800.746.8307

CLIENT INFORMATION:	
Address:	
	State: Zip:
COMPANY OFFICERS:	
Name:	Title:
Name:	Title:
Federal Tax Identification Number:	
Who do we contact regarding your accour	nt?
Name:	Title:
Phone:	Extension:
Fax:	e-mail address:
Corporate Web Address:	
PAYMENT INFORMATION	
Please Enter Your Card Account Number:	Expiration Date:
Credit Card Type:	(Visa, Mastercard, American Express)
Print Card Holders Name:	
Please Sign and Return By Fax To: 1.800.7	
	EDI Service of \$695.00 for one client, (\$295.00) for each et up Fee of \$300.00 per client. Service Includes Federal EDI
To accelerate the the registration process ple use this information to establish the EDI conn	ase include the first page of your government contract. We will nection with your government client.
Signature of Card Holder:	
City:	State: Zip: