



Item No.	Description	Width x Height	Box Qty.	1-4 Boxes	5+ boxes
STR1	SMALL STRETCHER	1-1/4 x 7/16	1200'	42¢ /ft.	25¢ /ft.
STR2	STANDARD STRETCHER	1-5/8 x 5/8	640'	47¢ /ft.	34¢ /ft.
STR3	HEAVY DUTY STRETCHER	2-1/4 x 1	320'	78¢ /ft.	69¢ /ft.
STR4	MEDIUM DUTY STRETCHER	2 x 5/8	560'	59¢ /ft.	50¢ /ft.
STR5	LARGE GALLERY WRAP	1-1/2 x 2	200	86¢ /ft.	76¢ /ft.
STR6	STANDARD GALLERY WRAP	1-1/8 x 1-1/2	420'	56¢ /ft.	49¢ /ft.
STR7	DOUBLE DUTY GALLERY WRAP	1-7/16 x 1-15/16	240'	89¢ /ft.	79¢ /ft.
STR8	2-1/2" DEEP GALLERY WRAP	1-1/8 x 2-1/2	240'	91¢ /ft.	83¢ /ft.
STR10	3" DEEP GALLERY WRAP	1-1/8 x 3	210'	\$1.05 /ft.	95¢ /ft.
STR11	3" WIDE GALLERY WRAP	3 x 1-1/8	240'	\$1.07 /ft.	97¢ /ft.
BBR1	BRACER BAR	1-7/16 x 1/2	200'	35¢ /ft.	25¢ /ft.

FOB Fullerton, CA. Prices subject to change. Box quantities may vary. Dimensions are intended for description only.



a division of GLC General, Inc.

# Account / Credit Application

## Company mailing/billing information:

Name of Business \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_  
 Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Fax \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 Website Address \_\_\_\_\_ Email Address \_\_\_\_\_  
 Type of Business: Corporation Partnership Individual Federal Tax ID#: \_\_\_\_\_  
 Principal/Officer Name: \_\_\_\_\_ S.S.#: \_\_\_\_\_  
 Home Address: \_\_\_\_\_ Phone No.: \_\_\_\_\_  
 Principal/Officer Name: \_\_\_\_\_ S.S.#: \_\_\_\_\_  
 Home Address: \_\_\_\_\_ Phone No.: \_\_\_\_\_  
 Years in Business: \_\_\_\_\_ Nature of Business: \_\_\_\_\_  
 Accounts Payable Contact Name: \_\_\_\_\_  
 A/P Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Ext. \_\_\_\_\_ Fax \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Thank You.**  
 Please print a copy of this form and fill it out as completely as possible. Sign and fax the completed form to Linen Liners, Inc. Fax. (714) 870-6585

**Linen Liners, Inc.**  
 100 W. Walnut Ave.,  
 Fullerton, CA 92832  
 Tel: (800) 742-2876  
 Fax:(714) 870-6585

## Company ship to address: ( Same As Mailing/Billing Address above )

Business (Trade Name / DBA): \_\_\_\_\_ Street Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_  
 Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Fax \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_

## Parent company information: (If applicable)

Company Name: \_\_\_\_\_ Street Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_  
 Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Fax \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_

## Please provide two trade references: (open accounts)

1. Vendor Bus. Name \_\_\_\_\_ Address \_\_\_\_\_  
 Contact \_\_\_\_\_ Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Fax \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 2. Vendor Bus. Name \_\_\_\_\_ Address \_\_\_\_\_  
 Contact \_\_\_\_\_ Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Fax \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

## Please provide a bank reference:

Bank Name: \_\_\_\_\_ Account# \_\_\_\_\_  
 Branch Address \_\_\_\_\_ Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Fax \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

## Complete this application:

Name of the individual completing this application : \_\_\_\_\_ Title/Position \_\_\_\_\_  
 Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Ext. \_\_\_\_\_ Fax \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_

Terms: 1% 10, net 30 days. FOB Fullerton, CA. I hereby agree to pay 1-1/2% per month service charge (18% annual) on past due balances, reasonable collection cost, attorney's fees and court costs if necessary to collect.

Signed \_\_\_\_\_ Date \_\_\_\_\_