



Goodheart-Willcox Publisher

18604 West Creek Drive • Tinley Park, IL 60477-6243
www.g-w.com • custserv@g-w.com

Orders 1-800-323-0440
Phone 1-708-687-5000
Fax 1-708-468-8297

ACCOUNT APPLICATION - PRIVATE ORGANIZATION

Name of Organization (include DBA if applicable) _____

Address _____

City _____ State _____ Zip Code _____

(_____) _____ (_____) _____
Telephone Fax Email – for emailed invoice

Prepay shipping (included on invoice) Please use the attached routing instructions

Ship to address (if different from bill to address) _____

City _____ State _____ Zip Code _____

(_____) _____ (_____) _____
Telephone Fax

Company Established Date: _____

Will purchases be drop shipped? ___Yes ___No If yes into what state(s): _____
(Attach sheet if necessary)

Will your purchases be subject to sales/use tax? ___Yes ___No

If no, please provide a current TAX EXEMPTION CERTIFICATE with your completed account application

Estimated Annual Purchases: \$ _____ Credit Line Requesting: \$ _____

Names, complete addresses, and telephone numbers of major suppliers with whom credit has been established:

1. _____
Company Name Contact Name Account Number

Address City State Zip Code

(_____) _____ (_____) _____
Telephone Fax E-mail

2. _____
Company Name Contact Name Account Number

Address City State Zip Code

(_____) _____ (_____) _____
Telephone Fax E-mail

3. _____
Company Name Contact Name Account Number

Address City State Zip Code

(_____) _____ (_____) _____
Telephone Fax E-mail

4. _____
Company Name Contact Name Account Number

Address City State Zip Code

(_____) _____ (_____) _____
Telephone Fax E-mail

Accounts Payable Contact:

Name

_____ (_____) _____

Email

Telephone

The undersigned verifies that the information submitted is true and correct.

Name (Please Print)

Title

Date

Signature

The undersigned as an inducement to grant credit warrants that the information submitted is true and correct. You are authorized to investigate the credit references listed above.

Name (Please Print)

Title

Date

Signature



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Below is Goodheart-Willcox Publisher's preferred method of payment:

Please supply this information to your accounts payable department and/or general accounting department

Vendor Information

Federal Employer
Identification Number: 36-2135994

E-Mail
Address: accounting@g-w.com

Name: Goodheart-Willcox Co, Inc.

Phone: 708-623-1838

Contact Name: Janet Malone

Title: Accounting Manager

Financial Institution Information

Name of Financial Institution: Chase

Address of Financial Institution: 10 S Dearborn Chicago, IL 60603

Representative's Name: Mary Marciniak

Phone: 312.732.6898

Routing Number: 071000013

Account Number: 757313882

We also accept credit card and checks via mail: Goodheart-Willcox Publisher
ATTN: Accounts Receivable
18604 West Creek Drive
Tinley Park, IL 60477

Thank you.

Accounting Department
Goodheart-Willcox Publisher