



## NEW CUSTOMER / UPDATE FORM

*Check one:* New Customer:   
 Update Customer File:

<b>Customer Number:</b> (leave blank if new customer)	
<b>Company Name:</b>	
<b>Address:</b>	
<b>Address 2:</b>	
<b>City/ ST / Zip Code:</b>	
<b>Telephone:</b>	<b>Fax:</b>
<b>Contact Name:</b>	<i>Title:</i>
Email address:	
<b>Contact Name:</b>	<i>Title:</i>
Email address:	
<b>Contact Name:</b>	<i>Title:</i>
Email address:	

Liquor License #: \_\_\_\_\_  
 Liq License exp date: \_\_\_\_\_  
 State Tax ID number: \_\_\_\_\_

Email order confirmation with total:   
 Fax order confirmation with total:   
 Call with order confirmation and total:

**Delivery Instructions:**  
 (cross streets, delivery times, etc.) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Please Fax To: 702.441.0256**  
**Call Toll Free: 888.544.5623**  
**Or E-Mail to [newcustomers@globe-distributing.com](mailto:newcustomers@globe-distributing.com)**

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