TEJAS HYDRAULICS INC

	New Vendor Load Form							
LEC	GAL BUSINESS NAME:		WEB ADDRESS:					
<u>M A I L I N G</u>	ADDRESS:		ADDRESS:					
	CITY - STATE - ZIP:	ଅ ଅ	CITY - STATE - ZIP:					
	TELEPHONE:		TELEPHONE:					
	FACIMILE:	т т	FACIMILE:					
	E-MAIL:		E-MAIL:					

Key Contact Information						
POSITION or TITLE						
FIRST & LAST NAME						
TELEPHONE						
FACIMILE						
E-MAIL ADDRESS						

Below for TEJAS HYDRAULIC use

PRODUCT(S) OF INTEREST

LOADED BY:	
SEND APPLICATION:	
PAYMENT TERMS:	
TAX CODE:	
DATE LOADED:	