



**BUENA** Tool co.

*Buena Means Good . . . Good Quality, Service and Selection.*

433 LAGUNA STREET • SANTA BARBARA, CA 93101  
(805) 963-3885 • FAX (805) 690-1144  
www.buenatool.com

## CUSTOMER AUTHORIZED PURCHASER LIST

Date: \_\_\_\_\_ Acct. # \_\_\_\_\_ Entered Date: \_\_\_\_\_ Employee # \_\_\_\_\_

Customer Name: \_\_\_\_\_ Phone # \_\_\_\_\_

We require Purchase Orders:  Yes  No (Please check one)

We require Job Name:  Yes  No (Please check one)

All purchases are Taxable:  Yes  No (If No, attach **signed** Resale Card)

***The following people are authorized to charge on this account:***

	Name	Lic #	Signature
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____
11.	_____	_____	_____
12.	_____	_____	_____

**I / We agree; It is my/our responsibility to specify those authorized to sign on this account, and to inform Buena Tool Co. of any and all subsequent changes, additions and deletions. I/We will be liable for any charges made by employees listed above if I/We fail to notify Buena Tool of subsequent changes.**

**Thank You, Buena Tool Co.**

\_\_\_\_\_

Authorized Signature
Title
Date