

NEW ACCOUNT APPLICATION

Name of contact/client		
Phone		
E-mail		
Company		
Company mailing address		
Company billing address (if different)		
Commons AD contact name	A.D. o. możl	
Company AP contact name	AP e-mail	
	AP phone	
Terms Account holders will be billed on a monthly Payment terms are Net 30 days. Payment may be made via credit card, cash, Please make checks payable to TriCa	check, money order, or cashier's check.	
Payment may also be made via ACH/EFT.	_	

Send completed account application by e-mail to Hanane Stanghellini (hstanghellini@trical.com) or include this form with your first submitted sample.

For more information

Accounts and payments: Hanane Stanghellini (hstanghellini@trical.com)

General questions: Steve Koike (skoike@trical.com)

Mailing address

TriCal Diagnostics 8100 Arroyo Circle Gilroy, California 95020 Phone: 831-637-0195