

**A FAMILY OF  
COOPERATIVES**



**SERVING YOU  
SINCE 1932**

**Dusty Farm Store**  
121 Dusty Rd  
LaCrosse, WA 99143  
509-397-3111

**Colfax Farm Store**  
105 E Harrison  
Colfax, WA 99111  
509-397-4324

**Pomeroy Farm Store**  
2255 Villard  
Pomeroy, WA 99347  
509-843-3693

**Potlatch C-Store**  
120 6th St  
Potlatch, ID 83855  
208-875-1251

**Pullman Farm Store**  
355 NW State St  
Pullman, WA 99163  
509-332-2511

**Pullman C-Store**  
975 E Main  
Pullman, WA 99163  
509-334-1864

Corporation	
Proprietorship	
Partnership	
Limited Liability Co	

Business Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip+4 \_\_\_\_\_

Delivery Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip+4 \_\_\_\_\_

Phone: \_\_\_\_\_ Fax No: \_\_\_\_\_ Type of Business: \_\_\_\_\_ Year Est: \_\_\_\_\_

Subsidiary of: \_\_\_\_\_ Division of: \_\_\_\_\_

(Parent Company)

Owners, Partners or Officers	Title	Home Address	Home Phone
1			
2			

Federal ID #: \_\_\_\_\_ State of Incorporation: \_\_\_\_\_ email: \_\_\_\_\_

Local Tax Code: \_\_\_\_\_ Do you OWN or RENT your place of business \_\_\_\_\_

State License # \_\_\_\_\_ Landlord: \_\_\_\_\_

Purchasing Agent: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

Trade References	Name	Address	Phone #	Fax #
1				
2				
3				

Total Credit Requested: \$ \_\_\_\_\_ (If request exceeds \$5000.00, please submit financial statement.)

Terms: The customer agrees to pay the amount due per terms stated. If legal proceedings become necessary, the buyer further agrees to pay all costs and expenses, including reasonable attorneys fees and court costs, incurred by the seller in the collection thereof, and that venue of any such action shall be in Whitman County, Washington. Customer grants permission to utilize consumer credit reports and trade references for the processing of this credit application.

Applicants Signature \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_