



2020 Yonkers Rd. Toll Free: 1-800-241-0124  
 4240 MSC Raleigh: (919) 716-3600  
 Raleigh, NC 27699-4240 Fax: (919) 716-3975  
 Courier No. 53-71-00

**SALES TO STATE, LOCAL, AND RETIRED EMPLOYEES: ACCOUNT APPLICATION FORM**

DATE: \_\_\_\_\_

**ALL FIELDS MUST BE FILLED OUT  
 COPY OF ID BADGE, CHECK STUB OR VERIFICATION OF INCOME  
 LETTER IS REQUIRED**

NAME & BILL TO (HOME ADDRESS):	DEPARTMENT EMPLOYED WITH:
_____	_____
_____	_____
_____	_____
_____	_____

E-MAIL: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

**PLEASE CHECK ONE** BEACON #: \_\_\_\_\_

STATE EMPLOYEE:  LOCAL GOVERNMENT EMPLOYEE:  RETIRED:

CONTRACT EMPLOYEE:

My purchase from NCCE was a result of:

Referral       Trade Show       Catalog       Internet

Direct Mail       Trade Publication       Customer Service Contact

Contact by Sales Representative       Other

**PAYMENTS CAN BE MADE BY THE FOLLOWING METHODS:  
 CREDIT CARD, CHECK OR CERTIFIED MONEY ORDER**

I understand that purchases made from Correction Enterprises for prescription eyeglasses must be paid in full at the time of pick-up. Invoices for other items not paid in full within 90 days of the date are considered delinquent, and will be subject to collective action pursuant of GS 143-553.

Signature \_\_\_\_\_

Title: \_\_\_\_\_

**ACCOUNTING USE ONLY**

Sales Representative ID      County Code      Account Number      Agency Type