



**Athena Computer Power Corporation (ACPC)**  
1210 John Reed Court. City of Industry, CA 91745-1812  
Tel: 626.810.5008 Fax: 626.810.5555 [www.athenapower.us](http://www.athenapower.us)

## BANK ACCOUNT/CREDIT VERIFICATION

(CONFIDENTIAL)

**This Section is to be completed by Customer's authorized agent:**

Name of Account Holder: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_ Fax No: \_\_\_\_\_

Name of Bank: \_\_\_\_\_ Account No: \_\_\_\_\_

Bank Address: \_\_\_\_\_

Bank Phone No: \_\_\_\_\_ Bank Fax No: \_\_\_\_\_

**\* The undersigned hereby authorizes the release of bank account/credit information for the purpose of purchasing merchandise from Athena Computer Power Corp.**

Signature of Authorized Agent: \_\_\_\_\_

Name of Authorized Agent: \_\_\_\_\_

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

---

**This Section is to be completed by Bank's authorized agent:**

Account Name: \_\_\_\_\_

Checking Account: \_\_\_\_\_ Date Opened: \_\_\_\_\_

Current Balance: \_\_\_\_\_ Average balance within last 6 months: \_\_\_\_\_

Line of Credit:  Yes  No Secured:  Yes  No

Amount: \_\_\_\_\_ Balance: \_\_\_\_\_

Prepared by: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

---

Please send by fax to 626-810-5555 ACPC, Attn. Credit Dept.  
1210 John Reed Court. City of Industry, CA 91745  
or email to [info@athenapower.us](mailto:info@athenapower.us)