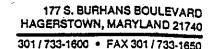


## Established 1873

| Application for Business Credit |  |          |                                       |                       |  |
|---------------------------------|--|----------|---------------------------------------|-----------------------|--|
| Business Information            |  |          |                                       |                       |  |
|                                 |  |          |                                       |                       |  |
| Name of Corp                    | - 1 -11  |          |                                       |                       |  |
| Street Address                  | S:   |          |                                       | City:                 |  |
| State:                          | Zip:   |          | Phone # ( )                           |                       |  |
| Partnership                     | Corporation  | Owner    | o <del>pis.</del>                     | Fax # ( )             |  |
| FEIN:                           |  |          | Tax Exemption #                       |                       |  |
|                                 |  |          | **attach copy of certi                | ficate to application |  |
|                                 |  |          |                                       |                       |  |
|                                 |  | Name of  | Principals                            |                       |  |
|                                 |  |          |                                       | 77°.1                 |  |
| Name:                           |  |          |                                       | Title:                |  |
| Address:                        | l·   |          |                                       | City:                 |  |
| State:                          | Zip:   |          | Phone # ( )                           |                       |  |
| Name:                           |  | •        |                                       | Title:                |  |
| Address:                        |  |          | TITE                                  | City:                 |  |
| State:                          | Zip:   |          | Phone # ( )                           |                       |  |
|                                 |  |          |                                       |                       |  |
|                                 | THE STATE OF THE S | Trade Re | eferences:                            |                       |  |
| ,<br>3.T                        |  |          |                                       |                       |  |
| Name:                           |  |          |                                       |                       |  |
| Address:                        |  |          |                                       |                       |  |
| City, State, Zi                 | p:   |          | F # //                                |                       |  |
| Phone # ( )                     |  |          | Fax # ( )                             |                       |  |
| Name:                           |  |          |                                       |                       |  |
| Address:                        |  |          |                                       | 1_47,47,410           |  |
| City, State, Zi                 | p:   |          | P#/                                   |                       |  |
| Phone # ( )                     |  |          | Fax # ( )                             |                       |  |
| Name:                           |  |          |                                       |                       |  |
| Address:                        |  |          | · · · · · · · · · · · · · · · · · · · |                       |  |
| City, State, Zi                 | p:   |          | For # (                               |                       |  |
| Phone # ( )                     |  |          | Fax # ( )                             |                       |  |
| Danis Dafanana                  |  |          |                                       |                       |  |
| Bank Reference                  |  |          |                                       |                       |  |
| Name of Bank                    | · ·  |          |                                       |                       |  |
| ļ                               | <u> </u>   |          | · · · · · · · · · · · · · · · · · · · |                       |  |
| Address:                        |  | MATE - E |                                       |                       |  |
| City, State, Zi                 | h.   | .,       | Phone # ( )                           |                       |  |
| Account #                       |  |          | FHORE # ( )                           |                       |  |
| Fax # ( )                       |  |          |                                       |                       |  |





Established 1873

Terms: Net 30 days. A finance charge calculated at a monthly periodic rate of 1.5% (which is an annual percentage of 18%) may be made on the amount overdue.

Payment on account balances is acceptable by cash, check, traveler's check, or money order. Credit/debit card's will be accepted at time of purchase only.

In the event my (our) account is referred to an attorney or collection agency for collection, I (we) agree that, as part of any judgment entered against me (us), the court may include a reasonable attorney's fee or collection agency fee in an amount equal to fifteen (15%) of the principal amount of the judgement.

I (we) authorize the above named references to supply any information pertinent to determine my (our) credit history and capabilities without risk of liability in regard to outcome of such inquiries.

| Business Name |      |
|---------------|------|
| Signature     | Date |
| Title         |      |