



APPLICATION FOR CREDIT and CREDIT RELEASE AUTHORIZATION

Business Entity Name: _____ Tel. No.: _____
 Trade Name (if different): _____
 Mailing Address: _____ Fax No.: _____
 City: _____ State: _____ Zip: _____ How long at this address? _____
 Shipping Address (if different): _____
 City: _____ State: _____ Zip: _____
 Email address: _____

General Information

Purchasing Manager: _____ Accounts Payable Manager: _____
 Business type: Sole Proprietorship Partnership Corporation Other: _____
 Federal Tax I.D. #: _____ How Long under this ownership? _____
 Do you require a purchase order prior to issuing payment? Yes No

Bank Reference

Bank Name: _____ Account No.: _____
 Address: _____ Fax No.: _____
 Contact Person: _____ Tel No.: _____

Business or Trade References

1. _____ Tel. No.: _____
 2. _____ Tel. No.: _____
 3. _____ Tel. No.: _____

- For the purpose of obtaining merchandise on credit, the above can be relied on as complete and accurate.
- We are financially able to meet our obligations and will abide by your terms (net 30 days from invoice date).
- Past-due amounts are subject to a finance charge of 1.5 percent per month.
- We agree to pay any court costs, attorneys' fees and costs of collection of unpaid charges we incur.

For the purpose of obtaining merchandise on credit from Adventure Graphics, Inc. ("AGI"), the undersigned, a duly authorized employee or officer of the company named herein, does hereby authorize AGI to obtain/verify our credit history and authorizes the release of such information to AGI by signature below:

COMPANY NAME: _____

Signature: _____

Title: _____

Date: _____

Note: While your application is being processed, please feel free to order from us with your credit card or check.

Credit Card Type: MasterCard Visa American Express Discover

Account Name on card: _____

Account No: _____ Exp.Date: _____ Security Code: _____

