

STANDARD GRAPHIC COMMUNICATIONS CREDIT APPLICATION

Firm Name _____ Date _____
 Address _____ Phone _____
 City _____ State _____ Zip _____ Own/Rent Building _____
 If rent, from who? _____ Address _____
 Type of Business _____ Owned Since _____

Ownership: Sole Ownership Partnership Corporation Fed Tax ID# _____

Owner _____

Name	Home Address	Phone#	Social Security #
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Partners: (1) _____
 Name Home Address Phone# Social Security #

(2) _____
 Name Home Address Phone# Social Security #

Corporation: President _____ Treasurer _____

Vice President _____ Secretary _____

Bank _____ Checking
 Name/Branch Phone Acct No. Savings

Account Rep. _____

Bank _____ Checking
 Name/Branch Phone Acct No. Savings

Account Rep. _____

Trade References Amount of Credit Requested Per Month _____

1) Name _____ Phone _____

Address _____ City _____ State _____ Zipcode _____

Terms _____ When Opened _____

2) Name _____ Phone _____

Address _____ City _____ State _____ Zipcode _____

Terms _____ When Opened _____

3) Name _____ Phone _____

Address _____ City _____ State _____ Zipcode _____

Terms _____ When Opened _____

Applicant's signature attests financial responsibility, ability and willingness to pay our invoices in accordance with our terms. Past due invoices are subject to a late penalty of 1 1/2% per month. Applicant agrees to pay reasonable collection fees (including attorney fees) plus late penalties in case of default.

The Applicant further acknowledges careful reading, understanding and agreement to the Terms and Conditions of Sale which are printed on the reverse of this document. A facsimile application received will be considered an original copy, and the Terms & Conditions appearing on the reverse shall be assumed as having been read and accepted. The applicant hereby authorizes and instructs any person, company or credit reporting agency to compile and furnish any information concerning the applicant and/or the company.

Signed _____ Title _____

Signed _____ Title _____

Date _____ Company _____

Billing Address _____
 Required on Invoice: P.O. No. Job No. Job Name Person Ordering
 Credit Limit: _____ Salesperson _____ Information verified by: _____

FIRM NAME _____

I HEREBY CERTIFY,

That I hold valid seller's permit No. _____
issued pursuant to the Sales and Use Tax Law; that I am engaged in the business of selling

_____ that the tangible personal property described herein which I shall purchase from:

Lithocraft Company

_____ will be resold by me in the form of tangible personal property; PROVIDED, however, that in the event any of such property is used for any purpose other than retention, demonstration, or display while holding it for sale in the regular course of business, it is understood that I am required by the Sales and Use Tax Law to report and pay for the tax, measured by the purchase price of such property.

Description of property to be purchased: _____

Printed material & special printing aids

Dated: _____ Signature _____

at _____ By and Title _____

Phone _____ Address _____