

FOSTER PRINTING SERVICE, INC.

Credit Application



| COMPANY INFORMATION | | | | | | | | | | | |
|--|--|--|--|-------------------------------|--------------------------------------|------------------------------|-----------------------------------|--------------------------------------|----------------------------------|------|--|
| Company Name | | | | | | | | | | | |
| Street Address | | | | | | Suite # | | | | | |
| City | | | | State | | ZIP | | | | | |
| Billing Address | | | | | | | | | | | |
| City | | | | State | | Zip | | | | | |
| Phone | | | | Rent <input type="checkbox"/> | | Own <input type="checkbox"/> | | Owned Since | | | |
| Type of Business | | | | | | | | | | | |
| Tax Exempt <input type="checkbox"/> | | If Tax Exempt box is checked, a copy of your tax exempt certificate must be submitted with credit application. | | | | | | | | | |
| Federal Tax ID: | | | | | | | | | | | |
| OWNERSHIP | | | | | | | | | | | |
| Type of Ownership | | Proprietorship <input type="checkbox"/> | | | Partnership <input type="checkbox"/> | | | Corporation <input type="checkbox"/> | | | |
| Type of Ownership | | | | | | | | | | | |
| Address | | | | | | | | | | | |
| Principals | | <i>Please list Partners and Officers and their titles.</i> | | | | | | | | | |
| 1 | | | | 2 | | | | | | | |
| 3 | | | | 4 | | | | | | | |
| Accounts Payable Manager | | | | | | | | | | | |
| YOUR BANKS | | | | | | | | | | | |
| Name | | | | | Branch | | | | | | |
| Phone Number | | | | | Account Number | | Checking <input type="checkbox"/> | | Savings <input type="checkbox"/> | | |
| Name | | | | | Branch | | | | | | |
| Phone Number | | | | | Account Number | | Checking <input type="checkbox"/> | | Savings <input type="checkbox"/> | | |
| TRADE REFERENCES | | | | | | | | | | | |
| Company | | | | | | Phone | | | | | |
| Address | | | | | | | | | | | |
| Company | | | | | | Phone | | | | | |
| Address | | | | | | | | | | | |
| Company | | | | | | Phone | | | | | |
| Address | | | | | | | | | | | |
| SIGNATURE | | | | | | | | | | | |
| <i>Applicants signature attests to financial responsibility, ability to pay and agreement to our terms of net 30 days; 18% interest plus attorney fees in case of default.</i> | | | | | | | | | | | |
| Signed | | | | | | Title | | | | Date | |