

AUTHORIZED SIGNATURE_

2229 Stewart St. Suite A Stockton, CA 95205 Phone 209 948-1724 Fax 209 948-1896

CREDIT APPLICATION	DATE					
COMPANY NAME	TYPE OF BUSINESS SOLE PROPRIETORSHIP					
ADDRESS					ERSHIP	
CITY	STATE	ZIP CORPORATION				
ACCOUNTS PAYABLE CONTACT		PHONE				
NO. OF YEARS IN BUSINESS		NO. OF EMPLOYEES				
PAYMENT PERSONALLY GUARANTEED	□ YES	□ NO				
BY	-	TITLE				
OWNERSHIP						
NAME OF OWNER		PHONE				
HOME ADDRESS		_CITY		_STATE	ZIP	
CREDIT REFERENCE						
COMPANY NAME		PHONE				
ADDRESS		CITY		STATE	ZIP	
COMPANY NAME		CITY	PHC	NE		
ADDRESS		CITY		_STATE	ZIP	
COMPANY NAME	<u> </u>	PHONE				
ADDRESS	77.70.40.00.00.00.00.00.00.00.00.00.00.00.00	_CITY		_STATE	ZIP	
BANK REFERENCE						
BANK NAME		PHONE				
ADDRESS	CITY_		STATE_	ZI	P	
ACCOUNT NUMBER						
ALL STATEMENTS MADE HEREIN ARE TRUE TO THE BE AND ALL INQUIRIES NECESSARY FOR ACTION ON THIS			ORIZE THE AB	OVE COMPANY	TO MAKE ANY	

DATE_