R.E. DELGADO, INC.

CREDIT APPLICATION & AGREEMENT

APPLICANT (BUSINESS OR CORPORATE NAME) ACCOUNTS PAYABLE CONTACT NAME & PHONE #						
DUOINEGO OTDEET ADDDEGO			L DILLING ADDRESS (STREET	OD D O POW		
BUSINESS STREET ADDRESS			BILLING ADDRESS (STREET OR P.O. BOX)			
CITY STATE ZIP			CITY STATE ZIP			
	01/112					
BUSINESS PHONE #	YEARS ESTABLISHED		TYPE OF BUSINESS	F INCORPORATED	FINANCIAL STATEMENT	
NO. OF EMPLOYEES		DYEES	SOLE PROPRIETOR II	N STATE OF:	WILL BE MAILED	
BUSINESS FAX #	BUSINESS BLDG IS:		PARTNERSHIP C	DUNS NUMBER:	ENCLOSED	
	owr	ned rented	CORPORATION		DECLINED	
PRINCIPAL BUSINESS ACTIVITIES		PRIMARY SIC CODE	FEDERAL IDENTIFICATION NUMBER HAS OWNERSHIP CHANGED IN THE LAST 2-5 YRS? (if yes, explain on separate sheet of paper) YES NO NO NO NO NO NO NO NO NO N		yes, explain on separate sheet of	
CREDIT REFERENCES - 3 required (Names, Addresses, Phone Numbers & Fax Numbers):						
BANK REFERENCE: Checking Loan Savings E	Bank Name:		Phone:	Account	#:	
		1				
WE ESTIMATE MONTHLY OUTLAYS REQUIRED FOR FREIGHT & DUTIES AT:		PRINT NAME OF AP	PRINT NAME OF APPLICANT		TITLE	
\$.						
WE REQUEST A MONTHLY CREDIT LI	INF OF:					
WE REQUEST A MISTRIFET SKEDIT EI		SIGNATURE OF APP	PLICANT	DATE		
\$		J				
For use by R. E. DELGADO, INC.						
Credit Approved by: Date:			Credit Line:	Tern	ne.	
Distribution for Initial & Return:						
(Executive & Dept. Managers)						

TERMS: Our payment terms are **Net 10 days**. All invoice balances **over Net 10 Days** will incur a finance charge of **1.5% per month**. In consideration of **R**. **E**. **DELGADO**, **INC**. extending credit to the Applicant, the Applicant agrees to pay for services rendered/funds to be advanced for the Applicant in accordance with our terms and conditions. Applicant agrees to each of the terms and conditions of **R**. **E**. **DELGADO**, **INC**. to the Applicant. Applicant acknowledges that all sums due **R**. **E**. **DELGADO**, **INC**. which have not been paid according to terms may be subject to late payment penalties and/or credit suspension. Should it become necessary to place the account with a collection agency or attorney, the Applicant agrees to pay all collection and attorney fees in addition to all other sums due. Applicant authorizes **R**. **E**. **DELGADO**, **INC**. to obtain credit and financial information concerning the Applicant at any time and from any source. The undersigned warrants that the above agreement has been carefully read and that Applicant understands it completely.