

APPLICATION FOR CREDIT

BY:

NAME OF FIRM OR INDIVIDUAL _____				
ADDRESS _____				YEARS IN BUSINESS _____
CITY _____	STATE _____	ZIP _____	AREA CODE _____	PHONE _____

HEREBY applies for credit in accordance with the terms and conditions of



RGI Publications, Inc.
 P.O. Box 338
 Olathe, KS 66051

CREDIT MANAGER _____
NET 10
OUR NORMAL CREDIT TERMS _____

The following information must be provided. It will be kept in the strictest confidence.

OWNERSHIP:

<input type="checkbox"/> Corporation <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Individual <input type="checkbox"/> LLC				
SSN#: _____			FED TAX ID#: _____	
1. _____	_____	_____	_____	_____
NAMES OF PRINCIPAL(S)	COMPLETE ADDRESS	ZIP	PHONE	
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

BANK _____	BANK ADDRESS _____
CHECKING ACCOUNT # _____	BANK OFFICER _____
	PHONE _____

REFERENCES:

1. _____	_____	_____	_____
BUSINESS NAME	COMPLETE ADDRESS	ZIP	PHONE
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

We certify that all the information on this form is correct. We fully understand your credit terms and agree to the proper payment in consideration of extended credit.

(Signed) _____

Date _____ 20 _____

(Title) _____

VERIFICATION:

REFERENCES CHECKED BY _____	<input type="checkbox"/> CREDIT APPROVED BY _____	DATE _____
REFERENCE RESULTS _____	<input type="checkbox"/> CREDIT REFUSED BY _____	DATE _____
_____	APPROVED CREDIT LIMIT: _____	