

2630 East 28th Street • Long Beach, CA 90755 562/426-6978 • 800/352-7522 • Fax: 562/490-0121 PacificDataForms.com

DISTRIBUTOR APPLICATION

The following information is submitted for your consideration.

| BUSINESS NAME | | | | | TYPE OF BL | JSINESS | | YEAR ESTABLISHED | |
|--|------------|------------------------|---------------|-----------|------------------------|---------|------------|------------------|--|
| STREET ADDRESS | | | | | CITY, STATE & ZIP CODE | | | | |
| PHONE NO. | FAX NO. | | EMAIL ADDRESS | | | | RESALE NO. | | |
| OUR LEGAL ENTITY OUR LEGAL ENTITY CORPORATION PARTNERSHIP LIMITED LIABILITY COMPANY PROPRIETORSHIP OTHER: IF A CORPORATION, LIST NAMES OF OFFICERS AND TITLES, IF OTHER ENTITY, LIST NAMES OF PARTNERS OR OWNERS. | | | | | | | | | |
| IF A CORPORATION, LIS NAME & TITLE | T NAMES OF | HOME ADDRESS | LES, IF OTHEF | R ENTITY, | | | NERS OR OW | NERS. | |
| | | | | | | | | | |
| | | | | | | | | | |
| OUR BANK (NAME & BRANCH) ACCOUNT NUMBER | | | | | | | | | |
| ADDRESS CITY, STATE & ZIP C | | | & ZIP CODE | | PHONE NUMBER | | | | |
| LIST AT LEAST THREE TRADE REFERENCES WITH WHICH YOU ARE CURRENTLY DOING BUSINESS WITH (Attach a separate sheet if more than three). COMPANY NAME ADDRESS, CITY, STATE & ZIP CODE PHONE NO. FAX NO. | | | | | | | | | |
| | ADDI | 1233, OTT, STATE & ZIF | CODE | | FIION | L NO. | | NO. | |
| | | | | | | | | | |
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The representations contained in this application are true and correct. Pacific Data Forms, Inc. is hereby granted permission to verify all credit/personal information through public and private sources and to obtain any credit reports it deems necessary including, but not limited to, investigative consumer reports as defined by Public Law 91-508, Title VI (Fair Credit Reporting Act) et. seq.

Applicant agrees to pay reasonable attorneys' fees and costs to Pacific Data Forms, Inc. in the event any litigation is brought by Pacific Data Forms, Inc. to collect any monies owed by Applicant to Pacific Data Forms, Inc. Applicant further agrees that venue for such action shall be in the County of Los Angeles, State of California, and that Applicant hereby submits to the jurisdiction of the appropriate court in said county.

| | | X | | | | | |
|------|-------|-----------|------|--|--|--|--|
| NAME | TITLE | SIGNATURE | DATE | | | | |
| | | | | | | | |

CONTINUING PERSONAL GUARANTY

For good and valuable consideration, receipt of which is hereby acknowledged, the undersigned hereby absolutely and unconditionally guarantees the performance and payment of any debt, account, monies, obligation and/or other liability owed by Applicant to the Pacific Data Forms, Inc., including reasonable attorneys' fees and costs. I hereby waive any obligation of Pacific Data Forms, Inc. to proceed first against Applicant. I agree to pay reasonable attorneys' fees and costs to Pacific Data Forms, Inc. in the event any litigation is brought by Pacific Data Forms, Inc. to enforce the terms of this Continuing Personal Guaranty. I agree that venue for any court action shall be in the County of Los Angeles, State of California, and I hereby submit to the jurisdiction of the appropriate court in said county.

Pacific Data Forms, Inc. is hereby granted permission to verify all credit/personal information through public and private sources and to obtain any credit reports it deems necessary, including, but not limited to, investigative consumer reports as defined by Public Law 91-508, Title VI (Fair Labor Credit Reporting Act) et. seq.

NAME

SOCIAL SECURITY NO.

DRIVER'S LICENSE NO. & STATE

Designers and Manufacturers of Quality Business Printing –