



pacific data forms, inc.

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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 BUSINESS	YEAR ESTABLISHED
STREET ADDRESS		CITY, STATE & ZIP CODE	
PHONE NO.	FAX NO.	EMAIL ADDRESS	RESALE NO.

OUR LEGAL ENTITY <input type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> LIMITED LIABILITY COMPANY <input type="checkbox"/> PROPRIETORSHIP <input type="checkbox"/> OTHER:		
IF A CORPORATION, LIST NAMES OF OFFICERS AND TITLES, IF OTHER ENTITY, LIST NAMES OF PARTNERS OR OWNERS.		
NAME & TITLE	HOME ADDRESS	CITY
OUR BANK (NAME & BRANCH)		ACCOUNT NUMBER
ADDRESS	CITY, STATE & 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.

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
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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	DATE
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