CREDIT APPLICATION FOR A BUSINESS ACCOUNT								
BUSINESS CONTACT INFORMATION								
Company Name (the "Applicant"):								
Contact Person; Title:	·							
Phone:	Fax:		E-mail:					
Registered company address:								
City:			State:		ZIP Code:			
Date business commenced:			1					
Sole proprietorship:	Partner	ship:	Corporation:		Other:			
BUSINESS AND CREDIT INFORMATION								
Primary business address:								
City:			State:		ZIP Code:			
How long at current address?								
Telephone:	Fax:		E-mail:					
Bank name(s):								
Bank address(es):		Phone:						
City:			State:		ZIP Code:			
Contact Name at Bank(s):								
Type of account:	Accoun	t number:						
Savings								
Checking								
Other								
		BUSINESS/TRA	DE REFERENCES					
1. Company name:								
Address:			1		1			
City:			State:		ZIP Code:			
Phone:	Fax:		E-mail:					
Type of account:								
2. Company name:								
Address:					1			
City:			State:		ZIP Code:			
	Phone: Fax:		E-mail:					
Type of account:								
3. Company name:								
Address:								
City:			State:		ZIP Code:			
Phone:	Fax:		E-mail:					
Type of account:								
BILLING/SHIPPING INFORMATION								
		BILI	<u>_ TO:</u>					
NAME/CONTACT:								
ADDRESS:		CTATE.		710.				
CITY: TELEPHONE:		STATE:	FAX:	ZIP:				
SHIP TO:								

NAME/CONTACT:							
ADDRESS:							
CITY:	STATE:		ZIP:				
TELEPHONE:		FAX:					
AGREEMENT							
1. All invoices are to be paid 30 days from the date of the invoice.							

- 2. Payments received by Accu-Label, Inc. within 10 days of the invoice date will receive a 1% discount.
- 3. After 30 days from the invoice date, all unpaid amounts owed to Accu-Label, Inc. shall accrue simple interest at the rate of 8% per annum.
- 4. By signing below, the Applicant agrees to pay all service charges, collection costs and fees incurred by Accu-Label, Inc. (including its reasonable attorney fees, expert fees, and court costs) in collection of any amounts owed by Applicant to Accu-Label, Inc. for a delinquent account, or otherwise.
- 5. This Application and the subsequent purchases by Applicant and its account shall be governed by and construed in accordance with the laws of the United States and of the State of Indiana, excluding its choice-of-law provisions. Any civil action commenced between Accu-Label, Inc. and the Applicant shall be commenced in and determined by one of the federal or state courts in Allen County, Indiana. Applicant hereby irrevocably and unconditionally consents and submits to the in personam jurisdiction of such courts in any such action between the Applicant and Accu-Label, Inc.
- 6. In the event that Applicant's signature(s) below is/are delivered by facsimile transmission or by e-mail delivery of a ".pdf" format data file, such signature shall create a valid and binding obligation of the Applicant executing (or on whose behalf such signature is executed) with the same force and effect as if such facsimile or ".pdf" signature page were an original thereof.
- 7. By submitting this application, Applicant authorizes to make inquiries into the banking and business/trade references that you have supplied above.

SIGNATURES				
Print Name:	Print Name:			
Title:	Title:			
Title: Date:	Date:			