



PO Box 331, 28419 Hwy 87 N, California MO 65018
E Mail: mail@zuckerfeather.com

Telephone: 573-796-2183
Fax: 573-796-2278

Date: _____

To: _____

CREDIT CONTRACT GUIDELINES

All sections of the following **credit contract must be completed in full;** we will only consider companies with annual sales of over one million dollars. Your initial order must be a minimum of five hundred dollars. The contract must be signed by an authorized agent of your firm, and because we are a wholesaler, section VI must be completed. If all the requested information is not provided, we will be unable to process your application for credit terms. If you feel that your firm does not meet the requirements; orders can be placed with a prepayment using a credit card, wire transfer, or company check, orders placed with a company check will be held until checks have cleared. We accept the following credit cards, Master card, Visa, American Express and Discover.

Before signing the credit contract, please be sure to read and understand the terms and conditions set forth in section III. This section cannot be altered without prior approval from our credit department or your application will not be processed.

If you have a pre-printed trade reference and company information sheet, this can be submitted with your credit application; alternatively a Financial Statement will also be accepted. Please provide a fax number for all trade references issued. Section III must be signed before submitting.

Re-orders placed over the phone are a minimum of one hundred dollars; alternatively orders can be place on our website, where minimums are fifty dollars. You must apply for user verification to order from the site WWW.ZUCKERFEATHER.COM

Please note: if terms are approved and your company is past due on three separate occasions, our Accounts Receivable Department will revoke terms and change the status of your account to prepaid.

Please return your completed credit contract by fax or mail. All questions should be directed to the credit department (ext 851) at (573) 796-2183

ZUCKER FEATHER PRODUCTS CREDIT CONTRACT

Serving the world since 1872

28419 Hwy 87 N, PO BOX 331
CALIFORNIA, MO 65018
TELEPHONE: 573-796-2183
FAX: 573-796-2278

Office Use Only			
Date _____	Terms _____	Credit Limit _____	Approved By _____
Update _____	Terms _____	Credit Limit _____	Approved By _____
Update _____	Terms _____	Credit Limit _____	Approved By _____

ALL SECTIONS MUST BE COMPLETED IN FULL AND SECTION III MUST BE SIGNED IN ORDER TO PROCESS YOUR APPLICATION.

I Business Name _____

Billing Address _____

City and State _____ Zip Code _____ Bus. Tel. () _____

Business Organization: Corporation Partnership Proprietorship Bus. Fax () _____

Type of Business: Wholesale/Dist. Retail Chain Other (Specify) _____

Annual Sales \$ _____ No. of Employees _____ Year Started Business _____

II List of Officers, Partners or Individual Owner:

(1) Name _____	(2) Name _____
Address _____	Address _____
City & State _____	City & State _____
Home Phone () _____	Home Phone () _____

Name of Manager _____

Do You Own Rent your place of business, and name of landlord _____

III Terms
In consideration of the extension of credit from ZUCKER FEATHER PRODUCTS, Inc., we agree to your terms of sale as follows:

(1) We agree that payment be made as the terms on the invoice indicate. We understand and agree to pay a finance charge of 1½% per month (equal to 18% per annum) on any purchase past due.

(2) We also agree that should collection or the commencement of suit ever become necessary to settle our account, the laws in the State of Missouri shall apply. Reasonable collection fees and attorney's fees will be paid by us.

MINIMUM ORDER must be \$100.00 exclusive of shipping charges.

TERMS **Net 15 to rated accounts.** All other shipments may be prepaid with a money order, certified check, cashier's check, or wire transfer. Orders prepaid with a personal or company check will be held for 2 weeks pending bank clearance. Orders may also be charged to a MasterCard, Visa, Discover/Novus or American Express credit card. Sorry no C.O.D.'s.

NO SHIPMENTS WILL BE MADE TO PAST DUE ACCOUNTS.

CREDIT CARDS Furnish MasterCard, Visa, Discover, American Express account number and expiration date of card.

CREDIT CARD CONTRACT Some companies may be required to sign a Credit Card Contract in order to establish an open account.

We are now current with all suppliers and other credit grantors except as listed and we hereby authorize ZUCKER FEATHER PRODUCTS to verify all credit and financial information provided herein. I hereby certify that the information on this contract is correct to the best of my knowledge. I have read and understand the above and agree to the said terms stated.

COMPANY NAME _____

NAME (Please Print) _____ TITLE _____

SIGNATURE _____ DATE _____

IV BUSINESS REFERENCES

Names and COMPLETE addresses of at least four (4) trade references from whom you are presently purchasing from with credit terms.

(1) Name _____
Address _____
City, State _____ Zip _____
FAX _____
Account No. _____

(2) Name _____
Address _____
City, State _____ Zip _____
FAX _____
Account No. _____

(3) Name _____
Address _____
City, State _____ Zip _____
FAX _____
Account No. _____

(4) Name _____
Address _____
City, State _____ Zip _____
FAX _____
Account No. _____

V BANK REFERENCES

(1) Name _____
Address _____
City, State _____ Zip _____
Tel./Fax No. _____
Account No. _____
Name of Officer You Deal With _____

(2) Name _____
Address _____
City, State _____ Zip _____
Tel./Fax No. _____
Account No. _____
Name of Officer You Deal With _____

MULTI-JURISDICTION SALES TAX EXEMPTION CERTIFICATE

TO OUR CUSTOMERS: IN ORDER TO COMPLY WITH THE MAJORITY OF STATE AND LOCAL SALES TAX LAW EXEMPTION REQUIREMENTS. IT IS NECESSARY THAT WE HAVE IN OUR FILES, A PROPERLY EXECUTED CERTIFICATE FROM ALL OUR CUSTOMERS WHO CLAIM SALES TAX EXEMPTION.

vi I certify that

Name of Firm		
Street address or P.O. Box		
City	State	Zip Code

is engaged as a registered
____ Wholesaler
____ Retailer
____ Manufacturer
____ Lessor
____ Other _____

State	State ID No.	Sales Tax Permit No.	City or State	State Registration or ID No.
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General description of products to be purchased from the seller

I certify that if any property so purchased tax free is used or consumed by the firm as to make it subject to a sales or use tax we will pay the tax due direct to the proper taxing authority when state law provides or inform the seller for added tax billing. This certificate shall be a part of each order which we may hereafter give to you, unless otherwise specified, and shall be valid until canceled by us in writing or revoked by the city or state.

Authorized Signature (Owner, Partner, or Corporate Officer)
