



PO BOX 64799 ▪ LOS ANGELES, CA 90064 ▪ PHONE: (310) 470-6001 ▪ FAX: (310) 470-4121

Please complete both pages of the application.

FIRM NAME _____ PHONE # _____

ARE YOU KNOWN BY ANY OTHER NAME (SPECIFY) _____

BILLING ADDRESS _____

SHIP TO ADDRESS _____

LANDLORD _____	NAME _____	ADDRESS _____	PHONE _____
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BUSINESS BEGAN _____ UNDER PRESENT CONTROL SINCE _____

NATURE OF BUSINESS _____

THIS IS A CORPORATION PARTNERSHIP SINGLE PROPRIETORSHIP

THIS IS A DIV. OF _____ SUB. OF _____

ARE YOU LISTED WITH DUN & BRADSTREET? _____

DEBTOR'S SOCIAL SECURITY NO. (FOR PARTNERSHIP OR INDIVIDUAL) _____

OFFICERS OF THE COMPANY (include complete names, titles and addresses)

_____	_____	_____
_____	_____	_____
_____	_____	_____

BANK REFERENCES (include complete addresses, phone numbers and signed authorization*)

1. _____ Acct # _____

2. _____ Acct # _____

* I HEREBY AUTHORIZE THE ABOVE BANKS TO RELEASE INFORMATION REQUESTED _____

Signature

TRADE REFERENCES (Include name, address, phone number, and fax number)

1. _____

2. _____

3. _____

4. _____

5. _____

The above is provided for the purpose of obtaining merchandise on credit. I (We) hereby agree to pay reasonable collection costs, if necessary to collect. The undersigned official, to induce the granting of credit to the above named firm, hereby personally guarantees the company's credit.

By: _____ Title _____ Date _____
INDIVIDUALLY AND AS AN OFFICER OF THE FIRM

ALL INFORMATION IS CONFIDENTIAL AND USED ONLY TO EXTEND CREDIT.

CUSTOMER STATEMENT OF FINANCIAL CONDITION

NAME OF COMPANY _____

ADDRESS _____

NET SALES FOR PERIOD \$ _____ PERIOD COVERED _____ TO _____

Balance Sheet

Date _____, 20__

ASSETS

Cash in Bank & on Hand \$ _____

Accounts Receivable (net) \$ _____

Inventory \$ _____

Total Current Assets \$ _____

Furniture & Fixtures \$ _____

Other (describe)
_____ \$ _____

Total Fixed Assets \$ _____

TOTAL ASSETS* \$ _____

This Business is a

CORPORATION PARTNERSHIP

SINGLE PROPRIETORSHIP

*Total assets should equal Total Liabilities & Capital

LIABILITIES

Accounts Payable \$ _____

Loans & Notes Due within
One Year \$ _____

Total Current Liabilities \$ _____

Loans & Notes Due after
One Year \$ _____

Other (describe)
_____ \$ _____

Total Long-Term Liabilities \$ _____

CAPITAL

Stock \$ _____

Retained Earnings \$ _____

Other (describe)
_____ \$ _____

Total Equity (Net Worth) \$ _____

**TOTAL LIABILITIES &
CAPITAL*** \$ _____

I hereby solemnly declare and certify that the above statement is a true statement of my business.

Signature

Title

Date