

PROCEDURES TO ESTABLISH CREDIT WITH IPM LITHOGRAPHICS, INC.

To establish credit with IPM Lithographics, Inc. is a easy five (5) step process.

1. "Application For Credit" must be filled out.
 - Under "Business References" we must receive three out of the four references with a positive response.
 - If you do not have four (4) "Business References" it will be mandatory for you to fill out the "Credit Card Application" Form.
2. "Credit Check" forms filled out.
 - The four "Business References" that are indicated in the "Application For Credit" need to be filled out in section one of the "Credit Check" form. Your company name address and phone numbers need to be filled out in section two. Leave section three blank.
 - All four "Credit Check" forms must be submitted with your application. IPM Lithographics, Inc. will mail or fax these to the appropriate companies.
 - If you do not have four (4) "Business References" it will be mandatory for you to fill out the "Credit Card Application" Form.
3. "Credit Card Application" form filled out.
 - If a you want to wait the time it takes for "Business References" to come back this application form is not required to be filled out.
 - If you do not have four (4) "Business References" this form is mandatory in order to establish credit with IPM Lithographics, Inc.
4. "Resale Card" or "Printed Sales Message Certificate" filled out.
 - If you are within the State of California and requesting us not to charge sales tax this "Resale Card" or "Printed Sales Message Certificate" **MUST** be filled out. Without this card filled out prior to the delivery of the job sales tax **MUST** be collected. For those jobs qualifying for Section 1541.5(c-2) we **MUST** receive a Certificate for each location or mail house that we deliver to.
 - Companies that are requesting shipment to a location outside California which do not have a satellite office located with the state of California, will not be charged California sales tax and do not have to fill out "Resale Card" or "Printed Sales Message Certificate".
5. If customer has filled out "Application for Credit" and "Credit Card Application" and we have not received three out of four business references the customer will be allowed to take the job with the understanding if a check has not been received within 15 days the credit card authorized for use in the "Credit Card Application" will be charged.

Sincerely,

Accounting

APPLICATION FOR CREDIT

INSTRUCTIONS: Please print or type. Fill in all spaces and complete by signing where indicated. A signature is mandatory and should be signed by owner, partner or corporate officer, stating title.

Company or Corporate Full Name: _____

Business Address: _____

City _____ State _____ Zip _____

Date Established _____ At Present Location Since _____

Ownership Type: Sole Proprietor General Partnership
 (Circle One) Limited Partnership Corporation

If incorporated: Date Incorporated _____ Under Laws of What State? _____

OWNERS/OFFICERS:

1. Name _____ Title _____

Home Address: _____

Soc. Sec. # _____ Home Phone # _____

2. Name _____ Title _____

Home Address: _____

Soc. Sec. # _____ Home Phone # _____

3. Name _____ Title _____

Home Address: _____

Soc. Sec. # _____ Home Phone # _____

Have any of the above principals ever had a business failure or filed bankruptcy? YES NO
 If "YES" describe fully on a separate page.

Describe you business operations:

Your sales area: _____ Total number of employees: _____

Do your own or lease your business location: OWN LEASE
 (Circle One)

(OVER)

APPLICATION FOR CREDIT *(Continued)*

Name, Address and Telephone Number of Landlord:

Name: _____ Phone Number: _____

Address _____

BANK REFERENCES:

1. Name _____

Branch Address: _____

Type of Account: _____ Account #: _____

Contact: _____ Phone #: _____

2. Name _____

Branch Address: _____

Type of Account: _____ Account #: _____

Contact: _____ Phone #: _____

BUSINESS REFERENCES:	Name	Address	Phone #
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1. _____

2. _____

3. _____

4. _____

The above information is submitted for the purpose of obtaining credit. The undersigned authorizes you to make such inquires as are necessary to obtain credit information and authorizes my bank and/or suppliers to release information regarding my account(s). In consideration for the extension of credit, I/We agree to pay a late charge of 1-1/2% per month, a true annual rate of 18% per annum on any amounts past due 30 days (after billing or receipt of invoice), and to pay all reasonable attorney's fees and costs, if it becomes necessary to file suit to enforce collection.

_____	_____	_____	_____
<i>Signature</i>	<i>Print Name</i>	<i>Title</i>	<i>Date</i>

_____	_____	_____	_____
<i>Signature</i>	<i>Print Name</i>	<i>Title</i>	<i>Date</i>

CREDIT CHECK REQUEST

Section One

Date: _____

To: _____

Phone (____) _____

Fax (____) _____

From: Accounting Department
IPM Lithographics, Inc.
9040 Carroll Way, Suite 9
San Diego, CA 92121
Phone (858) 271-0771
Fax (858) 271-0290

Section Two

Your company has been given to us as a credit reference by:

Name: _____ Phone Number: _____

Address _____

Please respond by fax or mail. Thank you for your cooperation.

Section Three

Date account opened: _____

Credit limit: \$ _____

Terms: _____

Highest recent credit: \$ _____

Current balance: \$ _____

Payment history: Prompt 30 Days Over 30 days
 Slow but collectable Unsatisfactory

General opinion of account: Excellent Good Fair Poor

Comments: _____

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 Slow but collectable Unsatisfactory

General opinion of account: Excellent Good Fair Poor

Comments: _____

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Credit limit: \$ _____

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Current balance: \$ _____

Payment history: Prompt 30 Days Over 30 days
 Slow but collectable Unsatisfactory

General opinion of account: Excellent Good Fair Poor

Comments: _____

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Name: _____ Phone Number: _____

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Please respond by fax or mail. Thank you for your cooperation.

Section Three

Date account opened: _____

Credit limit: \$ _____

Terms: _____

Highest recent credit: \$ _____

Current balance: \$ _____

Payment history: Prompt 30 Days Over 30 days
 Slow but collectable Unsatisfactory

General opinion of account: Excellent Good Fair Poor

Comments: _____

CREDIT CARD APPLICATION

If you wish to wait the time it takes for "Credit Check" forms to be mailed or faxed to the "Business References" and these forms sent back to IPM Lithographics, Inc. this application form is not required to be filled out. Otherwise, part of the approval process for an open account with IPM Lithographics, Inc. is to have a Mastercard, Visa or American Express account number on file. This Mastercard, Visa or American Express account will not be charged against unless an invoice, for the company stated is delinquent more than forty-five (45) days*. Since an invoice is due within thirty (30) days, a fifteen (15) day grace period has been added to ensure enough time has been allowed for mail. Once an invoice is forty-five (45) days* past due your Mastercard, Visa or American Express account will be charged and a receipt forwarded to your attention.



DATE

Month			Year

CARD NUMBER

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16			

Name _____
(as it appears on card)

Please fill in your Mastercard, Visa or American Express account number, expiration date, name as it appears on the card and indicate by checking the box which credit card you will be using for this credit approval.

I understand if an invoice for the company stated falls more than forty-five (45) days* past due my credit card account, as indicated above, will be charged against for the full invoice amount. I give authorization to IPM Lithographics, Inc. to charge against my credit card for any invoice which falls more than forty-five (45) days* past due, unless I have disputed the invoice in writing within the first thirty (30) Days.

Please sign, date and return to IPM Lithographics, Inc.

Company or Corporate Full Name: _____

Signature *Date*

Print Name *Title*

*See item five (5) on Procedures to establish credit with IPM Lithographics, Inc.

RESALE CARD

FIRM NAME _____
I HEREBY CERTIFY,
 That I hold valid seller's permit No. _____
 issued pursuant to the Sales and Use Tax Law; that I am engaged in the business of selling

 that the tangible personal property described herein which I shall purchase from:
IPM Lithographics, Inc.

 will be resold by me in the form of tangible personal property; PROVIDED, however, that in the event any
 of such property is used for any purpose other than retention, demonstration, or display while holding it for sale in
 the regular course of business, it is understood that I am required by the Sales and Use Tax Law to report and pay
 for the tax, measured by the purchase price of such property.

 Description of property to be purchased: **Printed Materials & Special Printing Aids**

 Dated: _____ Signature _____
 at _____ By and Title _____
City State
 Phone _____ Address _____

PRINTED SALES MESSAGES CERTIFICATE 1541.5(c-1)

I HEREBY CERTIFY, that the items purchased are printed sales messages and that the printed sales messages
 described herein which I shall purchase from **IPM Lithographics, Inc.**

 will be delivered by the seller or the seller's agent through the U.S. Postal Service or by common carrier at no cost
 to another person who becomes the owner of the printed material. If any of such printed material is determined
 not to be a printed sales message or is delivered other than as specified above, I understand that I am required by
 the Sales and Use Tax law to report and pay tax, measured by the purchase price of such property. Description of
 property to be purchased: _____

 Dated: _____ Phone _____
 Purchaser: _____
(Company Name)
 Address: _____

(City) (State) (Zip)
 Signature: _____
(Signature of Authorized Person)
 Title: _____
 Seller's Permit No. of Purchaser (if any): _____

PRINTED SALES MESSAGES CERTIFICATE 1541.5(c-2)

I **HEREBY CERTIFY**, that the items purchased are printed sales messages and that the printed sales messages described herein which I shall purchase from IPM Lithographics, Inc. delivered by the seller to the mailing house designated below, will be delivered by the mailing house, acting as my agent, through the U.S. Postal Service or by common carrier at no cost to another person who becomes the owner of the printed material. If any of such printed material is delivered other than as stated above, I understand that I am required by the Sales and Use Tax law to report and pay tax, measured by the purchase price of such property. Description of property to be purchased: _____

Mailing House: _____
(Company Name)

Address: _____

(City) (State) (Zip)

Dated: _____ Phone _____

Purchaser: _____
(Company Name)

Address: _____

(City) (State) (Zip)

Signature: _____
(Signature of Authorized Person)

Title: _____

Seller's Permit No. of Purchaser (if any): _____