

U.S. CREDIT APPLICATION

NAME OF CONTACT PERSON

For Proprietorships (Individuals) and Partnerships, name, address and identification information must be completed on all individuals or partners involved. Append additional listings on a separate sheet if necessary.

ACCOUNT INTO DATE	NA.					
ACCOUNT INFORMATIO	/IN					
LEGAL NAME			SS# OR TIN#			
STREET ADDRESS						
CITY		STATE	ZIP CODE			
PHONE NUMBER		FAX NUMBER	EMAIL ADDRESS			
MAILING ADDRESS (IF DIFFEI	RENT FROM ABOVE)					
OWNERSHIP: O CO-OP	O CORPORATION	O GENERAL PARTNERSHIP	O PROPRIETORSHIP (INDIVIDUALS)	O LLC	O OTHER*	
*IF OTHER, PLEASE DESCRIBE T	TYPE OF OWNERSHIP					
OWNER			MANAGER			
PRESIDENT (IF CORPORATION/	(LLC)		SECRETARY			
PARTNERS NAMES (IF PARTNEF	RSHIP)					
Masterfeeds Ir	าc. assures that	t all information so re	eleased will be held in strict	confide	nce.	
CREDIT REFERENCES – N PLEASE APPEND A VOID		REE REQUIRED (MAY BE	SUBMITTED ON AN APPENDED	SHEET)		
	BANK / FARM CREDIT SERVICES (PRIMARY LENDER)			AUTHORIZATION TO RELEASE FINANCIAL STATEMENT: O YES		
BANK / FARM CREDIT SERVIC	ES (PRIMARY LENDE	R)	AUTHORIZATION TO RELEASE FINAN	ICIAL STATE	MENT: O YES	

PHONE NUMBER

FAX NUMBER

CREDIT REFERENCES CONTINUED...

2.	OPEN ACCOUNT CREDITOR						
	MAILING ADDRESS						
	NAME OF CONTACT PERSON	PHONE NUMBER	FAX NUMBER				
3.	OPEN ACCOUNT CREDITOR						
	MAILING ADDRESS						
	NAME OF CONTACT PERSON	PHONE NUMBER	FAX NUMBER				
PLEASE ATTACH A SIGNED, CURRENT FINANCIAL STATEMENT							
	FINANCIAL STATEMENT ATTACHED: O YES O NO						
	*IF NO, PLEASE COMMENT						
	CREDIT TERMS AVAILABLE – All invoices are due and payable in full according to terms as stated on invoice. If any invoice is not paid when due, Masterfeeds Inc. reserves the right to call all outstanding account balances of Customer immediately due and payable, without notice to Customer. As long as Masterfeeds Inc. chooses to forebear its right to immediate payment, Masterfeeds Inc. will assessa finance charge on that portion of the account which is overdue at a rate of interest equal to one and one half percent (1.50% per month 18% per annum, or the highest rate permitted by law. Masterfeeds Inc. reserves the right, from time to time, to alter the formula for calculating the amount of interest on Customer accounts. Customer agrees to pay all costs of collections incurred by Masterfeeds Inc., including reasonable attorneys' fees and any other legal fees and costs, should a default in payment or any other obligation of Customer occur. The undersigned has carefully read and understands all the terms and conditions of this credit application. The undersigned warrants that the information provided in this application is true and correct and may be relied upon by Masterfeeds Inc. for purposes of obtaining credit information and extending credit. This credit application is the undersigned's signed authorization to permit Masterfeeds Inc. to contact any credit information agency, bank, lender or other grantor of credit to release to Masterfeeds Inc. any and all financial statements and credit information requested. Masterfeeds Inc. has assured that all information so released will be held in strict confidence and released only upon my written authorization. This application is subject to Masterfeed Inc.'s delivery of separate written notice to Customer of final approval which may contain terms and conditions which are in addition to those stated herein. This agreement shall inure to the benefit of and be binding upon the parties hereto and their respective heirs, executors, administrators, personal representatives,						
	AUTHORIZATION SIGNATURE						
	NAME & TITLE		DATE				