

King of Mushrooms / Re Dei Funghi

P.O. Box 1181 Daly City, CA 94017 - 1181 U.S.A.

Main : 650.757.6910 Fax : 650.757.6195

www.kingofmushrooms.com e-mail: Joe@kingofmushrooms.com

Credit Approval Request

Name of Company: _____
Corporate name (Area Code) PHONE

STREET ADDRESS	CITY	STATE	ZIP
MAILING ADDRESS	CITY	STATE	ZIP

Please check whichever best describes your company:

Corporation Co Partnership Limited Partnership Sole Proprietorship

Business Facts

Business type _____ In Business since _____

Is Business a subsidiary or franchise? No Yes If yes, then name parent or franchiser _____

Length of time at present location _____ (years)

Incorporated under state law of _____

Previous location _____
ADDRESS CITY STATE ZIP

COMPLETE THE FOLLOWING INFORMATION FOR KEY CORPORATE OFFICERS, PARTNERS, OR AN INDIVIDUAL PROPRIETOR:

1. _____ NAME AND TITLE	2. _____ NAME AND TITLE
_____	_____
HOME ADDRESS	HOME ADDRESS
_____	_____
CITY / STATE / ZIP	CITY / STATE / ZIP
_____	_____
HOME PHONE NUMBER	HOME PHONE NUMBER
_____	_____
SOCIAL SECURITY NUMBER	SOCIAL SECURITY NUMBER

Banking References:

Name: _____ Type of Account: _____
Address: _____ Account Number: _____
Average Balance: _____
Individual to contact: _____ Phone: _____

Business References Where Credit is now Extended:

Name: _____ Name: _____
Address: _____ Address: _____
Phone: _____ Phone: _____
Name: _____ Name: _____
Address: _____ Address: _____
Phone: _____ Phone: _____

Credit amount applying for: _____

King of Mushrooms / Re Dei Funghi

P.O. Box 1181 Daly City, CA 94017 - 1181 U.S.A.

Main : 650.757.6910 Fax : 650.240.3540

www.kingofmushrooms.com e-mail: Todd@kingofmushrooms.com

Terms of Sale:

1. Until credit is approved by Re Dei Funghi / King of Mushrooms, all sales applicants shall be C.O.D.
2. A credit account shall, at no time, exceed the credit limit and payment terms. In the event credit limits are exceeded or time for payment not met, all shipments will immediately cease until the balance is paid in full.
3. Past due invoices over 10 days are subject to late charge of 18% per annum on the outstanding balance. If employment of an attorney is undertaken (including, but not limited to the commencement of an action) to collect any past due account, buyer agrees to pay attorney fees, costs and expenses incurred.

I Hereby authorize the above bank to release credit information _____

By: _____ Title: _____
Corporate Officer / Partner Signature

_____ Date: _____
Print Name

Personal Guarantee

In consideration of the extension of credit by the Seller, herein to buyer herein, the undersigned does jointly and severally personally guaranty to pay and be responsible for payment of all sums, balances and accounts due Seller by Buyer, including collection charges and/or attorneys' fees. This shall be an open and continuing guaranty and shall continue in force notwithstanding any change in the form of such indebtedness, or renewals or extensions granted by seller, without obtaining any consent thereto, and until expressly revoked by written notice from me/us Seller. Any such revocation shall not in any manner affect my/our liability as to pay any indebtedness existing prior there to I/we hereby waive notice of the acceptance of this agreement, notice of default or non-payment and waive action required by an statute, against the buyer. No delay on Seller's part in exercising any right hereunder, or taking any action to collect or enforce payment of any obligation hereby guaranteed, either as against the Buyer or any other person primarily or secondarily liable with the Buyer, shall operate as a waiver of any such right or in any manner prejudiced Seller's rights against me/us. I/we agree that in the event of any default at any time by said Buyer. Seller shall be entitled to look to me/us immediately for full payment without prior demand of notice.

By: _____ - _____ Title _____
Corporate Officer/Partner Signature

_____ Date _____