

Please fill out credit application form and fax it to 314-569-8340 as soon as possible. This is a private fax machine that goes directly to the finance department.

Date _____

Date Business Began _____ Credit Limit Requesting \$ _____

Full Legal name of company for which credit is requested. _____

Mailing Address _____

City _____ State _____ Zip Code _____

Corporation _____ Sole Proprietorship _____ Partnership _____ LLC _____

Incorporated In (State) _____ Incorporation Date _____

Business Phone (_____) _____ Fax (_____) _____

e-mail address: _____ URL (if any) http:// _____

DUNS Number _____

A/P Contact _____ Phone No. (_____) _____

Tax Exempt # _____ Please fax exemption certificate with application

Name(s) of Principal(s) and/or Officers:

Name _____ Name _____

Address _____ Address _____

City _____ City _____

State _____ Zip _____ Phone _____ State _____ Zip _____ Phone _____

Please attach a copy of your most recent audited financial statement. If it is more than six months old, also attach a copy of the most recent interim statement. Please include both the balance sheet and income statement.

Trade References (list below firms from which you have purchased on open account)

Name _____ Account # _____

Address _____

City _____

State _____ Zip _____

Contact _____ Phone _____ Fax _____

Name _____ Account # _____

Address _____

City _____

State _____ Zip _____

Contact _____ Phone _____ Fax _____

Name _____ Account # _____

Address _____

City _____

State _____ Zip _____

Contact _____ Phone _____ Fax _____

Bank Reference (please complete information requested for the bank which handles your account)

Bank Name _____

Address _____

City _____

State _____ Zip _____

Contact _____

Account No. _____

The terms and conditions of this application shall, upon extension of credit by World Wide Technology, Inc., constitute an agreement of sale. No terms and conditions, different from those stated in the application, will become part of the agreement of sale.

World Wide Technology's standard payment terms are net 30 days from the date of the invoice. A signed credit application indicates your understanding and acceptance of these terms. Failure to pay on the net due date on each invoice shall deem the debt to be delinquent. Late payments may result in interest fees charged at the rate of 1% per month.

We certify that all of the information on this form is correct; and that we fully understand your credit terms and agree to the proper payment in consideration of extended credit, including any legal fees and court costs incurred while collecting delinquent amounts.

Signed by _____ Date _____ Title _____