



Please fax this form back to 818.718.4044
Attn: Credit Department

BANK REFERENCE REQUEST

TO BE COMPLETED BY NEW CUSTOMER

Name of Account Holder: _____

Name & Address of Bank/Financial Institution: _____

AUTHORIZATION

I authorize the above Financial institution to release information regarding my account to *Stock-Point Electronics, Inc.*, so that we may establish a NET 30 Open Account with them.

PRINT Name and Title: _____

Account Holder's Signature: _____

Today's Date: _____

TO BE COMPLETED BY REFERENCE BANK

As we realize that you are busy, we are sending this request by fax and ask that you answer a few short questions regarding your existing customer.

Date Account Opened: _____
mm-dd-yyyy

Type of Bank Account(s):

Deposit Accounts: 1. _____ 2. _____ 3. _____	Average Balance over the past year (In US\$ Equivalent): _____ _____ _____	NSF: _____ COMMENTS: _____ _____ _____ _____ _____
Loan Accounts: 1. _____ 2. _____ 3. _____	Average Balance over the past year (In US\$ Equivalent): _____ _____ _____	

How has/have the Account(s) been maintained?

Exceptionally

Satisfactory

Unsatisfactory

Verification of Customer's Signature: Compares favorably to our records.

Bank Officer's Name and Title (PRINTED): _____

Bank Officer's Signature: _____

Bank Officer's Seal/Stamp:



APPLICATION FOR CREDIT

(PLEASE PRINT)

DATE: _____

COMPANY NAME: _____

PROPRIETOR OR PARTNER'S NAME(S): _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: _____ FAX: _____

COMPANY IN BUSINESS SINCE _____ ANNUAL SALES: _____

REFERENCES

(Please list only those companies that you buy from on open account.)

COMPANY NAME: _____

CONTACT PERSON: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: _____ FAX: _____

COMPANY NAME: _____

CONTACT PERSON: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: _____ FAX: _____

COMPANY NAME: _____

CONTACT PERSON: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: _____ FAX: _____

I anticipate my credit requirements to be \$ _____ per month.

SIGNATURE: _____ TITLE: _____

TODAY'S DATE: _____