

P.O. Box 70 • Las Vegas, Nevada 89125

CREDIT APPLICATION

Credit Dept Fax 702-383-4699

FIRM NAME			D	DBA				DATE		
ADDRESS/ CITY/ STATE/ ZIP CODE				TELEP				PHONE		
BILLING ADDRESS (IF DIFFERENT FR						PARENT COMPANY (IF SUBSIDIARY)			
PREVIOUS ADDRESS	S (IF LESS THEN :	5 YEARS AT CURRENT	Γ LOCATIO	ON)						
FAX ()	IAIL ADDRESS	ADDRESS				WEB SITE				
BUSINESS STR	UCTURE									
PROPRIETOR, PARTNERS OR OFFICERS - NAME/ TITLE		SOC. SEC. NO.	SOC. SEC. NO. HOME ADDRESS, CITY, STATE, ZIP C			, ZIP CODI	ODE		TELEPHONE NO.	
TYPE OF BUSINESS										
PROPRIETORSHIP	CORPORATION	CORPORATION NATURE OF BUSINESS				CREDIT LINE DESIRED PER MO		LINE DESIRED PER MONT		
YEAR ESTABLISHED TIME AT PRESENT		ENT LOCATION	YEAR.	AR AND STATE OF INCORPORATION			CAPITALIZATION		LIZATION	
EVER FILE BANKRUPTCYNOYES, YEAR	HERE FILED?	HAVE YOU BEEN DISCHARGED?NOYES			EVER MAKE DEBT SETTLEMENT?NOYES, YEAR					
MEDIA OR TR	ADE REFE	ERENCES								
NAME		ADI	ORESS (C	(CITY, STATE, ZIP CODE)		EMA	EMAIL ADDRESS		TELEPHONE NO.	
1										
2								\perp		
3										
certify that the above stater hrough an advertising agen collection is necessary through this is an application, and ag	cy is our responsi gh process of suit.	ibility. The Advertiser It is understood that al	and/or Ad l accounts	dvertiser's guaranton are billed on the fir	c(s) agree(s) to pay st of the month and	court costs are due by	and/or reaso the 15th of the	nable a month	attorney's fees, or both a following insertion.	
any separate binding advertished payment of advertising.			-			-	- 1			
This contract is entered in a Nevada, shall have exclusive contract. Advertiser and gua Advertiser and guarantor(s) of	jurisdiction to hear rantor(s) waive an	r and determine any cla y right they may have to	ims or dis o assert th	putes between the Re e doctrine of forum	eview-Journal and A non conveniens (i.e.	dvertiser an an inconve	nd/or Advertise nient forum) o	er's gua or other	arantor(s) pertaining to	
		E SIGNED BY								
FIRM NAME				PRINT NAME AND TITLE						
ADDITIONALLY, I AG			r K							
RESPONSIBLE FOR 1	PAYMENT OF	ADVERTISING			JNED BY NT NAME					
				I KII	11 IAVIAIT					
		FOR REVIEW-JOURN	IAL USE	ONLY / DISPOSTIO	N OF CREDIT APF	PLICATION				
ACCOUNT NUMBER	T NAME	ME				ACCOUNT REPRESENTATIVE				
APPROVED - CREDIT L DECLINED - CASH WIT		PER MON	ТН	REMARKS						
CREDIT MANAGER		BUSINESS MANAGER		DATE	GENERAL M	ANAGER			DATE	