

Company Name:				
Billing Address:				
City:	State:	Zip Code:		
Delivery Address:				
City:	State:	Zip Code:		
Years Open: Existing Busin	ess with Change of Ownership?	_ Date of Ownership Change:		
PLEASE LIST OTHER BUSINESSE	S OWNED/OPERATED IN THE GILLETTE	EPEPSI TERRITORY:		
Account #	Store # Loca	ation		
Account #	Store # Loca	tion		
Proprietorship/Partnership/Corpor	ation/Subsidiary/Other:			
OWNER INFORMATION				
Owner Name:	Owner Phone # (Home):			
Owner Phone # (Cell):	Owner Phone # (Other):			
Address:	City:	State:Z	ip:	
Social Security #	or Business Federal ID	#	-	
NOTE: APPLICATIONS WILL NOT FEDERAL ID NUMBER.	BE ACCEPTED WITHOUT OWNER'S SO	CIAL SECURITY NUMBER OR BL	ISINESS	
BANK / FINANCIAL INSTITUT	ION INFORMATION			
Name:	Phone #	Acct #		
Address:	City:	State: Zip:		
CREDIT / TRADE REFERENC	ES			
(1) Name:	Phone #	Acct #		
	City:			
	Oty	0tate	<b>⊢'∀</b> '	
(2) Name:	Phone #	Acct #		
Address:	City:	State:	Zip:	

## **GILLETTE CREDIT POLICY FOR ACCOUNTS**

- - - -

.....

. . . . . . . .

Upon approval of this application, it is agreed that all purchases will be paid in full and in accordance with the terms of sale as stated on Pepsi-Cola Bottling Company of (La Crosse WI, Decorah IA, Rochester MN, Mankato MN) invoice(s). Net 10<sup>th</sup> of the month following delivery, which is the maturity date. Should the undersigned not pay according to terms, it is understood that credit privileges may be withdrawn and deliveries withheld. If it is necessary to obtain assistance in order to collect any outstanding account, the undersigned agrees to pay all reasonable legal fees and expenses including, without limitation, any court costs or expenses, including those incurred before and after judgment, arising in connection with same. Further, the undersigned agrees that delinquent accounts may be converted to a cash on delivery payment basis, and may be subject to a delinquency charge of 1.5% per month (18% APR) on the unpaid amount as of said maturity date and the expiration of each succeeding month.

If a check is returned to Pepsi-Cola Bottling Company of (La Crosse WI, Decorah IA, Rochester MN, Mankato MN) by the customer's bank for non-sufficient funds (NSF), a charge invoice of \$25.00 will be issued to the customer. The customer is required to replace the NSF check plus the \$25.00 charge with cash, money order or certified check.

The above information, as well as that given on the reverse side, is warranted to be true. In support of this application, Pepsi-Cola Bottling Company of (La Crosse WI, Decorah IA, Rochester MN, Mankato MN) is hereby authorized to obtain credit and/or financial information from the bank/financial institution and other credit reporting organizations or commercial firms with whom the undersigned have/has done business. It is understood that any such credit and/or financial information will be full, true and complete disclosure in connection with the matter referred to in this application for credit and supporting documents.

Authorized Representative (Please Print):				
Authorized Signature:		Date:		
Title:(must be signed by Owner				
(must be signed by Owner	, President, or CEO If Ir	icorporated)		
FOR INTERNAL USE ONLY				
Sales Manager Name:		Location:		
Comments:				
Date Received:				
Approved: Declined:				
Signed by Authorized Representati	ve			
	••.•	GPCbeverage.com		
1900 West Avenue South La Crosse, WI 54601	1303 Short Street Decorah, IA 52101	3393 Commercial Drive SW Rochester, MN 55902	1970 James Drive North Mankato, MN 56003	
608-785-0450	563-382-8433	507-288-3772	507-345-5031	