



Dear Customer,

We at McCormick-Armstrong thank you for the opportunity to do business with you. Our company is pleased to offer the following payment terms:

Cash in advance:

Payment by Check: Mail to PO Box 1377, Wichita, KS 67201

Payment by Wire Transfer: Please contact the Accounts Receivable Department for instructions.

Payment by ACH: ACH authorization form must be completed.

Payment by Credit Card: We accept Visa, Mastercard, and American Express. Quote plus estimated freight will be charged to credit card prior to production. Overages or billing variances will be charged prior to shipment. Credit card authorization form must be completed.

Net 30 days of invoice date:

Payment by Check: Mail to PO Box 1377, Wichita, KS 67201

Payment by Wire Transfer: Please contact the Accounts Receivable Department for instructions.

Payment by ACH: ACH authorization form must be completed.

Please note that postage is not eligible for terms or payment by credit card. Payments for postage can be made via wire transfer, ACH, or check made out to US Postmaster.

If your preference is credit of net 30, please complete the attached credit application and fax to 316-263-4511. Should you have any questions or concerns, please do not hesitate to call me directly at 316-206-1220.

Best Regards,

Evonne Gaylord
Chief Financial Officer



CREDIT APPLICATION

Date: _____ Account Executive _____

Firm Name: _____ Telephone: _____

Address: _____
Street P.O. Box City State Zip

Parent Company: _____

Address: _____
Street P.O. Box City State Zip

Type of entity: Proprietorship Partnership Corporation FIN/SSN _____

Nature of business? _____ How long in business? _____

State of Incorporation: _____ Is P.O. given for all jobs? No Yes

Sales Tax Exempt? No Yes If yes, attach copy of exemption form. Amount of credit requested? _____

Accounts Payable Contact: _____ Telephone: _____ Email: _____

Officers or Principal Owners: Address Telephone Email

Bank References: Address Telephone Fax

Trade References: Address Telephone Fax

I (we) certify that all of the above statements in this application are true and complete. I (we) agree that all accounts are due in full and payable by the due date at the creditor's address. If payment is not made, I (we) understand that creditor reserves the right to charge the less or (i) 1 1/2% per month or (ii) the maximum applicable usurious rate Finance Charge on any or all amounts overdue, subject to the terms of the invoice. I (we) further agree to reimburse creditor any costs of collection including any or all legal fees that may be incurred. I (we) further declare that we have read, signed, and agree to the terms and conditions of McCormick Armstrong which are attached to this credit application.

Printed Name: _____ Title: _____

Signature: _____ Date: _____