



Neet Products, Inc.

5875 E. HIWAY 50 SEDALIA, MO 65301 PHONE 660-826-6762 FAX 660-826-4942

DEALER APPLICATION

All information will be kept in confidence and used only in determining your qualifications for establishing the terms of future business transactions with Neet Products, Inc. All reference inquiries are sent by mail. Please allow 3 weeks for processing. Immediate shipments can be processed by C.O.D. cash and will show a 3% discount.

PLEASE RUSH MY FIRST ORDER C.O.D. CASH.

CREDIT DEPT. USE ONLY

ACCT. NO. REF SENT TERMS CR LT AUTH BY DATE



IMPORTANT: FILL OUT AND SIGN FORM ON BACK

NAME OF FIRM BILLING ADDRESS SHIPPING ADDRESS CITY STATE ZIP PHONE FAX TYPE OF OWNERSHIP YEARS IN BUSINESS EMPLOYEES FULL TIME PART TIME TYPE OF SALES ANNUAL GROSS SALES

NAMES OF OWNERS, PARTNERS, OR OFFICERS:

NAME HOME ADDRESS CITY STATE ZIP TITLE PHONE NAME HOME ADDRESS CITY STATE ZIP

TERMS REQUESTED: C.O.D. OPEN ACCOUNT VISA/MASTERCARD NO. EXP.

CREDIT REFERENCES: LIST FOUR SUPPLIERS THAT SERVICE YOU AS REQUESTED ABOVE, (open account requires four open account references).

NAME ADDRESS CITY STATE ZIP PHONE FAX NAME ADDRESS CITY STATE ZIP PHONE FAX

YOUR BANK ADDRESS CITY STATE ZIP OFFICERS NAME PHONE CHECKING ACCOUNT SAVINGS ACCOUNT

I hereby certify that the information set forth above, together with all information submitted in connection with this application is true and correct. I understand that Neet Products, Inc. will rely on this information in extending credit to me.

Open account terms are net 45 from date shipped. By law a finance charge of not more than 1 1/2% per month will be accessed on any past due invoice. Rate is governed by individual state laws.

I have read and understand the terms of sale stated above and agree that such terms apply to all transactions with Neet Products, Inc.

SIGNATURE AND TITLE OF PERSON COMPLETING THE ABOVE INFORMATION DATE

PERSONAL GUARANTEE

I hereby agree to pay to Neet Products, Inc. all indebtedness now or hereafter owing by me to said company, whether individually, partnership or corporation. In consideration of Neet Products, Inc. extending credit to the above applicant, the undersigned does hereby individually and personally guarantee to Neet Products, Inc. the sum or sums of money as may at anytime hereafter become due to Neet Products Inc. from the said applicant for goods sold to the applicant whether said indebtedness be in the form of notes, bills or open account. If it becomes necessary to enforce this guarantee by suit, I agree to pay interest and attorney fees as allowed by law.

DATE SIGNATURE OF OWNERS

DATE SIGNATURE OF OWNERS

**MULTI-JURISDICTION
 SALES TAX EXEMPTION CERTIFICATE**

Issued to	Address	City	State	Zip Code
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I certify that

Name of Firm (Buyer)		
Street Address or P.O. Box No.:		
City	State	Zip Code

is engaged as a registered

- Wholesaler
- Retailer
- Manufacturer
- Lessor (*See note on reverse side.)
- Other _____

is registered with the below listed states and cities within which your firm would deliver purchases to us and that any such purchases are for wholesale, resale, ingredients or components of a new product to be resold, leased, or rented in the normal course of our business. We are in the business of wholesaling, retailing, manufacturing, leasing, or renting.

Product or Services Rendered

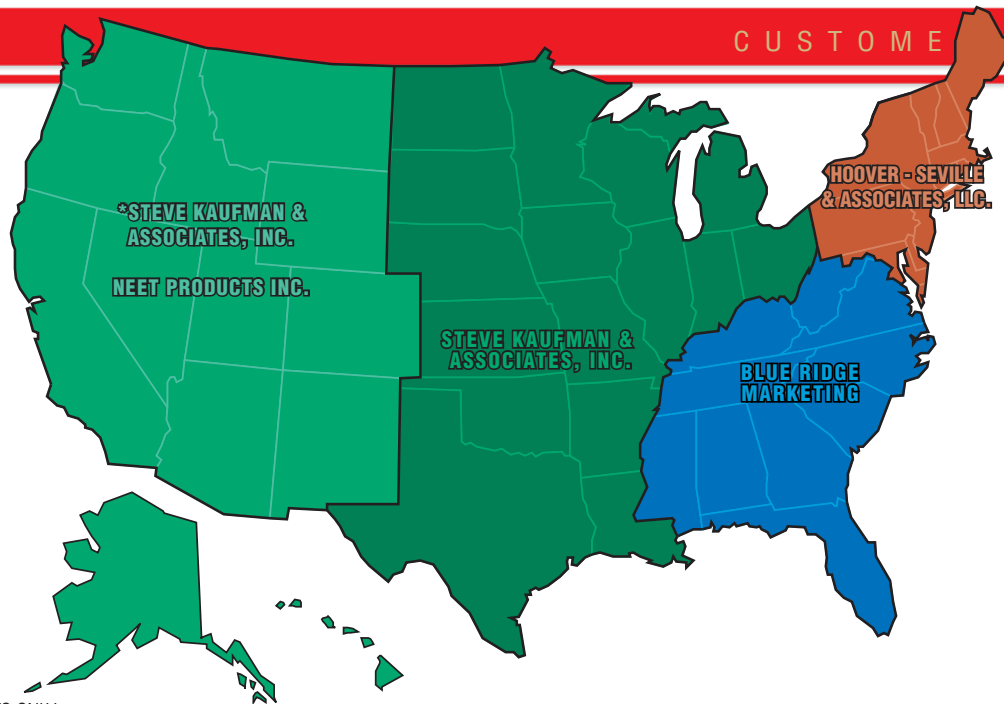
State	State ID No.	City or State	State Registration or ID No.
City or State	State Registration or ID No.	City or State	State Registration or ID No.
City or State	State Registration or ID No.	City or State	State Registration or ID No.

I further certify that if any property so purchased tax free is used or consumed by the firm as to make it subject to a Sales or Use Tax we will pay the tax due direct to the proper taxing authority when state law so provides or inform the seller for added tax billing. This certificate shall be part of each order which we may hereafter give to you, unless otherwise specified, and shall be valid until canceled by us in writing or revoked by the city or state.

General description of products to be purchased from the seller:
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I swear or affirm that the information on this form is true and correct as to every material matter.

Authorized Signature (Owner, Partner or Corporate Officer)	Title	Date
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* BUYING GROUP ACCOUNTS ONLY

STEVE KAUFMAN & ASSOCIATES, INC.**General Manager**

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