



HOME OFFICE
1046 W. JEFFERSON ST., MORTON, IL. 61550-1504 • TEL: 309/266-9733 • 800/888-9733 • FAX: 309/263-0609

BRANCH OFFICES
1408 DR. MARTIN LUTHER KING DR., BLOOMINGTON, IL. 61701-1454 • TEL: 309/828-8300 • FAX: 309/828-8399
3006 J. DAVID JONES PARKWAY, SPRINGFIELD, IL. 62707-5715 • TEL: 217/535-2800 • FAX: 217/535-2805
8623 N. UNIVERSITY ST., PEORIA, IL 61615-1631 • TEL: 309/589-5725 • FAX: 309/589-5721

APPLICATION FOR CREDIT

COMPANY NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE # _____ RES # _____ FAX # _____

TYPE OF BUSINESS OR PROFESSION _____

Check one of the following:

_____ Corporation _____ Partnership _____ Proprietorship _____ Personal

If applicant is a corporation or partnership, list principals therein and respective offices which they hold:

Table with 4 columns: Name, Office, Address, Date of Birth. Includes three rows of blank lines for data entry.

BANK REFERENCES: _____
Address, City, & State _____
Phone # _____

CREDIT REFERENCES: Please list trade creditors, preferably local suppliers.

- 1. Name _____ Address _____ City, State, & Zip Code _____ Phone # _____ Fax # _____
2. Name _____ Address _____ City, State, & Zip Code _____ Phone # _____ Fax # _____
3. Name _____ Address _____ City, State, & Zip Code _____ Phone # _____ Fax # _____

The undersigned does hereby acknowledge and agree that for all purchases or equipment that he will pay interest at the rate of 1 1/2% per month for all amounts which remain unpaid 30 days from the date of the invoice. The undersigned further agrees to pay Mathis-Kelley Construction Supply Company all attorneys fees, court costs, and any other collection costs that it may incur in the event the undersigned does not pay in full all charges on or before 30 days from the date of the invoice. The foregoing agreements shall apply to all purchases or rentals made by the undersigned from and after the date hereof.

FEIN or

Signed _____ Soc. Sec. # _____ Date _____