

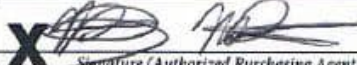
BRAND MAKERS464 South Main Street • Spanish Fork, Utah 84660
Phone 800-783-9138 • Fax 801-798-2179**CLIENT APPLICATION****BRAND MAKERS**Date 9/7/2017Fed I.D. Number N/APhone # 330 283 0727

Fax # _____

OH 44224
State Zip**COMPANY INFORMATION**Company Name HakronClient Name Matthew McDadeShipping Address 4871 June Ave. Stow
Street CityCheck one: ☐ Corporation ☐ Sole Proprietorship ☒ Partnership**WHERE SHOULD WE SEND INVOICES?**A/P Contact Name 330 972 2483 source@vakron.edu
Phone Fax EmailBilling Address 302 Buchtel Commons Akron OH 44325
Street City State Zip

Special Requests for Invoicing: _____

I have read and understand the terms of sale and agree to the conditions as outlined in the **TERMS AND CONDITIONS** following this page.

 Signature (Authorized Purchasing Agent)	<u>Matt McDade</u> Name (Print)	_____ Title	<u>9/14/2017</u> Date
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PAYMENT TERMS REQUESTEDALL NEW CLIENTS ARE REQUIRED TO PRE-PAY 1ST ORDER BY CREDIT CARD OR CHECK.
CHECK MUST BE RECEIVED BEFORE ORDER WILL GO INTO PRODUCTION.☒ **CREDIT CARD** CREDIT CARD TERMS: Please fill out the attached CREDIT CARD AUTHORIZATION FORM. ☒ **TAX EXEMPT CERTIFICATE**
PLEASE SUBMIT DOCUMENTATION☐ **NET 15** ☐ **NET 30** TERMS: If you would like Terms, please fill out the following CREDIT APPLICATION.**TRADE REFERENCES (PLEASE PROVIDE 3)**

	Company Name	Street Address	City	State	Zip	Phone	Fax
1.	_____ Company Name	_____ Street Address	_____ City	_____ State	_____ Zip	_____ Phone	_____ Fax
2.	_____ Company Name	_____ Street Address	_____ City	_____ State	_____ Zip	_____ Phone	_____ Fax
3.	_____ Company Name	_____ Street Address	_____ City	_____ State	_____ Zip	_____ Phone	_____ Fax


BANK INFORMATION

Bank Name	Street Address	City	State	Zip	Phone
Account #	Type of account	Contact			

CERTIFICATION & GUARANTY

The preceding information is given to Brand Makers as an inducement to granting open account credit. I certify that the information is correct to the best of knowledge. I hereby authorize the release of credit information to Brand Makers for the purpose of establishing credit terms.

The within guarantee is made for the benefit of, and to obtain credit on a continuing basis from Brand Makers. The undersigned (whether an individual or individuals, a proprietorship, a partnership, a corporation or other entity), guarantees to Brand Makers the prompt payment of all sums due and owing under the sales agreement when due, together with any interest, collection costs, and reasonable attorney's fees in enforcing the sales agreement, whether or not suit is instituted.

 Signature (Owner, Partner or Officer)	_____ Name (Print)	_____ Title	_____ Date
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If you decline to sign, please state your reasoning: _____

WE REPORT TO DUN & BRADSTREET



BRAND MAKERS

464 South Main Street • Spanish Fork, Utah 84660
Phone 800-783-9138 • Fax 801-798-2179

**CREDIT CARD AUTHORIZATION FORM**Company Name HAKron**BILLING INFORMATION**

Credit Card Number:	4715-6330-2893-8625
Expiration Date:	03/20
TOTAL charged card:	
Card Security Code:	690

CARD BILLING ADDRESS

First Name:	Rodney
Last Name:	Morgan
Company:	The University of Akron
Country:	United States
Address:	302 Buchtel Common

City:	Akron
State:	OH
Zip Code:	44325
Phone:	330-972-2483
Fax:	N/A
Email Address:	team@hakron.io

☐ Keep card on file and charge all future invoices.☐ One-time use only. Authorized for order/invoice # _____

	Rodney T. Morgan	Treasurer (Mr.)	9/13/17
Signature (Authorized Purchasing Agent)	Name (Print)	Title	Date

WE REPORT TO DUN & BRADSTREET

