

Credit Application and Agreement

Customer #

The undersigned ("Customer") hereby requests the extension of credit terms by Valley Cooperative Association (VCA), and in support of such request warrants the accuracy of the following information and, in the event VCA, in its sole discretion, agrees to extend such terms, agrees to the provisions set forth below.

Legal Name of Business:		Date Business Established:	
Doing Business As:		Federal Taxpayer ID#:	
Delivery Address:			
City:	State: Zip:	<u> </u>	
County:		D ' ' (0.11011D M')	
Phone: ()	Fax ()	Receiving Hours (6 HOUR Min.):	
Billing Address:	State:Zip:	Check One Of The Following:	. (0)
City:	State: Zip:	Dock/No Touch (1) Dock/Touch	
Email Address		No Dock/1 level (3) No Dock/Mi	illi Level (4)
Type of Organizati		ship/Limited Liability Partnership (LLP) [] Limited Liability (Company (LLC)
	artners, Officers, or other Principals:	Simple infliced clability is a the simple (cci) [] climited clability (Joinparty (LLO)
Name/Title:		Name/Title:	
% of Ownership:		% of Ownership:	
Home Address:		Home Address:	
City:	State: Zip:	City:State:	Zip:
Social Security #		Social Security #	
Phone: ()	-	Phone: ()	
Name of contact p	erson for payment:		
Accounts Payable:_		Phone: ()	
Email:		Fax: ()	
Bank Reference:			
Name of Bank:		Account #:	
Address:			
City:	State:	Bank Officer:	
Phone: ()		_	
Business Reference			
Name:		Name:	
City:	State:	City: Sta	te:
Phone: ()	-	Phone: ()	
Contact Name:		Contact Name:	
		and that he or she is authorized to execute this Credit Application	
		shall bear interest at the rate of 1.5% per month after the date	
		ees or collectors' commissions. Customer agrees any such int	
		Customer consents to jurisdiction and venue in Winnebago/Out customer and VCA, including but not limited to payment of invo	
	in Winnebago/Outagamie County, Wisconsin.		ices and imance charges
		warranted to be true. I/we hereby authorize the firm to whom	this application is made to
		nancial responsibility. In addition, the undersigned individual w	
•		izing that his or her individual credit history may be a factor in	
		e of a consumer credit report on the undersigned from time to	
		nsmitted by facsimile machine (fax) shall be treated in all mann	
		at transmitted by fax shall be considered an original signature.	
J : : : : : : : : : : : : : : : : : : :	. 3 , , ,	,	
Date:	Authorized Signature:	Print Name:	









Personal Guaranty:

To induce VCA to extend credit terms to Customer, the undersigned guarantees all obligations and liabilities of every kind and description arising out of credit granted by VCA to Customer at any time prior to the receipt by VCA of written notice of revocation by Guarantor, including interest and charges (the "Obligations"), and to the extent not prohibited by law, all costs, expenses and fees (including attorney's fees) at any time paid or incurred in endeavoring to collect all or part of the Obligations, or to realize upon this Guaranty. To the extent not prohibited by law, the undersigned expressly waive notice of acceptance, the creation of any Obligation, default under any Obligation, proceedings to collect from any party, and all diligence of collection and presentment, demand, notice and protest.

Guarantee Agreement for Multiple Locations:	
The undersigned,	extend credit to our affiliated company, to-wit,
Customer #:	Customer #:
Name of Business:	Name of Business:
Located at:	Located at:
City: State: Zip:	State: Zip:
Bakery Manager:	Bakery Manager:
Receiving Hours:	Receiving Hours:
Phone: Fax	Phone: Fax
Customer #:	Customer #:
Name of Business:	Name of Business:
Located at:	Located at:
City:	State: Zip:
Bakery Manager:	Bakery Manager:
Receiving Hours:	Receiving Hours:
Phone: Fax	Fax
	and affiliated company and agrees to be responsible for paying any bills owed to ompany does not pay to VCA for any reason, e.g. bankruptcy, insolvency, etc.
Date:	
Print Name:	
Signature:	