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APPLICATION FOR CREDIT

Company Information

Business Name: _____ d/b/a _____

Address / City / State / Zip Code: _____

Contact: _____ Phone: _____ Fax: _____

Legal Status of Business _____ Tax ID# or SS# _____ Years in Business: _____

State & Date of Incorporation: _____ Tax Exempt # (please attach cert.) _____

Annual Sales: _____ No. Of Employees: _____ Dun & Bradstreet No: _____

Website: _____ E-mail address: _____

Officers, Partners, or Proprietor Information

1. Name: _____ Title: _____ SSN: _____

Home Address: _____ Phone: _____

2. Name: _____ Title: _____ SSN: _____

Home Address: _____ Phone: _____

3. Name: _____ Title: _____ SSN: _____

Home Address: _____ Phone: _____

Bank Information

Bank Name: _____

Bank Address: _____

Account No.: _____ Contact: _____

Phone: _____ Fax: _____



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Trade References

- 1. Company. _____ Contact _____
Phone No.: _____ Fax No.: _____
- 2. Company. _____ Contact _____
Phone No.: _____ Fax No.: _____
- 3. Company. _____ Contact _____
Phone No.: _____ Fax No.: _____

- Has this company been involved in any bankruptcy proceedings? _____
- Have any principles of this company been involved in bankruptcy proceedings under the name of any other company? _____
- Are there any open lawsuits for nonpayment or any other obligations or unsatisfied mechanics liens or tax liens? _____

(If yes to any question, please provide details on separate sheet if applicable)

- What is the amount of credit you are requesting? _____
- Who is your LSAV sales contact? _____
- Is there a specific event LSAV is working on? _____

Credit Card Guarantee

Card Type _____

Credit Card # _____ Expiration _____

Billing Address _____

I, the undersigned, hereby authorize my credit card, as listed above, to be used as guarantee of payment for all outstanding charges for the above account.

Name as appears on card (print) _____

Signature _____ Date _____



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Terms and Conditions

The undersigned ("DEBTOR") hereby makes this application to Lakeshore Audiovisual Inc, ("CREDITOR") and in making this application the undersigned agrees that all amounts payable on or before the due date, as shown on each invoice, shall be paid, and if not paid on or before said date, are then delinquent. Should credit availability be granted by creditor, all decisions with respect to the extension or continuation of credit shall be in the sole discretion of creditor. Creditor may terminate any credit availability within its sole discretion. It is understood that creditor may impose and charge a finance charge or delinquency charge which is the lower of one and one half percent (1-½%) per month or the highest rate allowed by law on any amount which becomes past due and delinquent. Additionally, if legal proceedings are instituted for the collection of any amount unpaid on the undersigned's account ("evidence of indebtedness") with creditor, the debtor agrees to pay, in addition to the outstanding balance, reasonable attorney's fees in accordance with applicable law.

Terms and Conditions of Sale: The undersigned agrees to pay for all billings according to the terms of creditor which are NET 30 DAYS. No terms or conditions of purchase orders different from the terms of creditor will become part of any sales agreement, purchase order, or other document unless specifically approved in writing by creditor. Payments may be applied against open charges in the discretion of the creditor. On request the undersigned agrees that the continued solvency of the undersigned is a precondition to any sale made by creditor. The undersigned agrees to provide creditor a statement representing that the undersigned is and remains solvent. The undersigned acknowledges and agrees that creditor may utilize outside credit reporting services to obtain information on the undersigned. The laws of the State of Illinois shall be applicable to all suits arising under any agreement between the undersigned and the creditor.

The person signing this application certifies that he/she is authorized to sign on behalf of the undersigned and has the authority to legally bind the undersigned and that all of the information contained in this application, is true and correct to the best of their information, knowledge and belief. Applicant, in submitting this application for the purpose of obtaining credit, authorized creditor company to contact the references provided to obtain any information pertaining to the applicant's credit worthiness.

Please fax completed application to 312 491-0125

NAME OF APPLICANT: _____ TITLE _____
(PRINT OR TYPE)

SIGNATURE: _____ DATE _____