



APPLICATION FOR CREDIT

The undersigned hereby makes this application for credit to Michigan Turkey Producers Co-op., Inc. ("Seller"), and in making this application the undersigned agrees that all amounts payable on or before the due dates as shown on each invoice will be paid. If not paid on or before said date, are then delinquent. Should a credit availability be granted by Seller, all decisions with respect to the extension or continuation of credit shall be at sole discretion of Seller. Seller may terminate any credit availability within its sole discretion. THE PERSONS SIGNING THIS APPLICATION CERTIFY THAT ALL OF THE INFORMATION CONTAINED IN THIS APPLICATION AND ANY ATTACHMENTS ARE TRUE AND CORRECT TO THE BEST OF THEIR INFORMATION, KNOWLEDGE, AND BELIEF.

Trade Name: _____

Full Firm Name: _____

Delivery Address: _____

City _____ State _____ Zip _____

Phone: _____ Fax: _____

E-Mail: _____

Check Legal Status: _____ Proprietorship, _____ Partnership, _____ Corporation

State of Incorporation or registration of partnership: _____

Owners, partners, or officers' names & titles: _____

Credit Line Requested: \$ _____

Accounts Payable Contact: _____

Phone: _____ Fax: _____

Sales Tax Exempt: _____Yes _____No

(If Yes, applicant must submit sales tax exemption certificate)

A copy of the undersigned's current financial statement and/or annual report is attached to this application: _____YES _____NO

D&B Number: _____

TRADE REFERENCES

Name _____ Phone _____

Address _____ Fax _____

City _____ State _____ Zip _____

Contact Person _____ e-mail _____

Name _____ Phone _____

Address _____ Fax _____

City _____ State _____ Zip _____

Contact Person _____ e-mail _____

Name _____ Phone _____

Address _____ Fax _____

City _____ State _____ Zip _____

Contact Person _____ e-mail _____

BANK REFERENCE

Name _____ Phone _____

Address _____ Fax _____

City _____ State _____ Zip _____

Contact Person _____ e-mail _____

TERMS AND CONDITIONS OF SALE: The undersigned agrees to pay for all purchases according to the terms of Seller. No terms or conditions of purchase orders different from the terms of Seller will become part of any sales agreement, purchase order, or other document unless specifically approved in writing by Seller. The undersigned agrees that the continued solvency of the undersigned is a precondition to any sale made by Seller. The undersigned acknowledges and agrees that Seller may utilize outside credit reporting services to obtain information on the undersigned. The undersigned shall be responsible for all collection costs and attorney's fees in connection with any delinquent amount. The undersigned waives any right to trial by jury, and that the law of the State of Michigan shall be applicable to all suits arising under any agreement between the undersigned and the Seller.

Name of Business ("undersigned")

Authorized Agent Signature

DATED: _____

Print Name of Above

THIS INFORMATION WILL BE KEPT CONFIDENTIAL BY OUR CREDIT DEPARTMENT



Dear Valued Customer:

Welcome to Michigan Turkey Producers. Prior to the shipment of your first order, we need acknowledgement of receipt of the information provided in this letter. Please complete page 2 and sign where indicated below and return by fax to (616) 247-1545.

REMITTANCE INFORMATION

- **Terms: Net 14**
- Invoices are faxed.
- Remit to address:
Michigan Turkey Producers LLC
Dept: 4016
Post Office Box 30516
Lansing, MI 48909-8016

MICHIGAN TURKEY CONTACT INFORMATION

- | | |
|--|--|
| <ul style="list-style-type: none">• Customer Service – Cindy Long<ul style="list-style-type: none">○ Phone: (616) 475-4196○ Fax: (616) 475-4192○ Email: cindyl@miturkey.com | <ul style="list-style-type: none">Accounts Receivable – Doreen Droski<ul style="list-style-type: none">○ Phone: (616) 245-2221 ext 228○ Fax: (616) 247-1545○ Email: doreend@miturkey.com |
|--|--|

Thank you for purchasing from Michigan Turkey Producers.

I have read and understand the above information.

Signature

Date

Print Name

Title

Phone Number



NEW CUSTOMER SET-UP INFORMATION

Customer Number _____

Company Name _____

Phone _____ Fax _____

Address _____

City _____ State _____ Zip _____

Buying Group _____ Website _____

Broker _____ Broker Rep _____

Dir. of Pro. _____ Phone _____

Email _____ Fax _____

Buyer _____ Phone _____

Email _____ Fax _____

Sales Mgr _____ Phone _____

Email _____ Fax _____

Acct Payable _____ Phone _____

Email _____ Fax _____

Dock Appt _____ Phone _____

Email _____ Fax _____

Ship to Address (if different from above) _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Bill to Address (if different from above) _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Division _____ **Region** _____ **Price Bracket** _____ **Terms** _____

Price Bracket: B1 = Base , B2 = Mid , B3 = Truckload, Ind = Commodity

RM/Div. Mgr Approvals _____ **RM Date** _____ **DM Date** _____

in ACT by _____ Date _____ in MFG/Pro by _____ Date _____

Credit Approved by _____ **Date** _____

UNIFORM SALES & USE TAX CERTIFICATE—MULTIJURISDICTION

The below-listed states have indicated that this form of certificate is acceptable, subject to the notes on pages 2-4. The issuer and the recipient have the responsibility of determining the proper use of this certificate under applicable laws in each state, as these may change from time to time.

Issued to Seller: Michigan Turkey Producers
 Address: 1100 Hall St. SW Grand Rapids, MI 49503

Please keep a copy for your records, and
 FAX a copy to us at: (616) 247-1545

I certify that:

Name of Firm (Buyer): _____
 Address: _____

is engaged as a registered

- Wholesaler
- Retailer
- Manufacturer
- Seller (California)
- Lessor (see notes on pages 2-4)
- Other (Specify) _____

and 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 or service to be resold, leased, or rented in the normal course of business. We are in the business of wholesaling, retailing, manufacturing, leasing (renting) the following:

Description of Business: _____

General description of tangible property or taxable services to be purchased from the seller: _____

| State | State Registration, Seller's Permit, or ID Number of Purchaser | State | State Registration, Seller's Permit, or ID Number of Purchaser |
|-------------------|--|--------------------|--|
| AL ² | _____ | MO ¹³ | _____ |
| AR | _____ | NE ¹⁴ | _____ |
| AZ ²² | _____ | NV | _____ |
| CA ³ | _____ | NJ | _____ |
| CO ¹ | _____ | NM ^{1,15} | _____ |
| CT ⁴ | _____ | NC ²⁴ | _____ |
| DC ⁵ | _____ | ND | _____ |
| GA ⁶ | _____ | OH ²⁵ | _____ |
| HI ^{1,7} | _____ | OK ¹⁶ | _____ |
| ID | _____ | PA ²⁶ | _____ |
| IL ^{1,8} | _____ | RI ¹⁷ | _____ |
| IA | _____ | SC | _____ |
| KS | _____ | SD ¹⁸ | _____ |
| KY ²³ | _____ | TN | _____ |
| ME ⁹ | _____ | TX ¹⁹ | _____ |
| MD ¹⁰ | _____ | UT | _____ |
| MI ¹¹ | _____ | VT | _____ |
| MN ¹² | _____ | WA ²⁰ | _____ |
| | | WI ²¹ | _____ |

I further certify that if any property or service 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 directly to the proper taxing authority when state law so provides or inform the seller for added tax billing. This certificate shall be a 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.

Under penalties of perjury, 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: _____