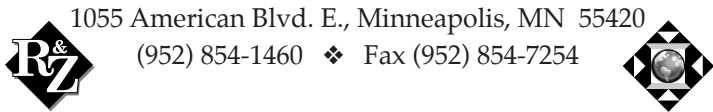


ACCOUNT APPLICATION

Rubenstein & Ziff and The Quiltworks



1055 American Blvd. E., Minneapolis, MN 55420

(952) 854-1460 ❖ Fax (952) 854-7254

Office Use Only

Acct. # _____
 Date _____ Area _____ Type _____
 Salesperson _____ Terms _____
 Credit Limit _____ Source _____
 Approved By _____

Information Sent

Business Name _____ Accts. Payable Name _____
 Mailing Address _____ Shipping Address _____
 City/State/Zip _____ City/State/Zip _____
 Business Phone _____ Payable Phone _____ Fax _____

Owner/Officer Information (must be completed)

Owner's Name _____ Owner's Name _____
 Home Address _____ Home Address _____
 City/State/Zip _____ City/State/Zip _____
 Home Phone _____ Home Phone _____
 Sole Owner Partnership Corporation Buyer's Name _____
 E-Mail Address _____

Company Information

Sales Tax ID No./EIN No. _____ Social Security # _____
 Description of Business _____ How long in business? _____
 Account Requested: C.O.D. (Co. Check) Cash Net 30 Credit
 Credit Card
 Card # _____
 Expiration _____ / _____ CVV Code _____
 Annual Sales _____
 Monthly line of credit desired _____
 Have you had an account with us before? _____
 Merchandise You Plan To Purchase: (check all that apply) Fabrics Supplies/Notions Industrial Long Arm Supplies

Applicant Agreement

APPLICANT AGREES THAT THE EXTENSION OF CREDIT SHALL BE SUBJECT TO, AND IN CONSIDERATION OF, THE FOLLOWING TERMS AND CONDITIONS:

1. Payment will be made of all amounts due as indicated on each invoice.
2. Amounts not paid on time are subject to a 1.5% per month (or maximum allowable charge by law in the state in which the sale is made) late payment charge to be assessed from the first day that the balance is past-due. However, no such charge shall be imposed when doing so would violate law.
3. Should it be necessary to refer the account balance to a licensed collection agency or attorney for legal action, applicant agrees to pay a 20% collection fee, reasonable attorney fees, and court costs.
4. Application authorizes and grants the seller the right to investigate credit references and banking information listed.
5. **I/WE HAVE READ THE ABOVE AGREEMENT AND AGREE TO THE TERMS AS OUTLINED**

Signed _____ Title _____ Date _____

I certify the information supplied is true and correct. I authorize Rubenstein & Ziff, Inc., to contact my references to establish credit terms

Signed _____ Title _____ Date _____

I certify the information supplied is true and correct. I authorize Rubenstein & Ziff, Inc., to contact my references to establish credit terms

Guaranty

In addition to agreeing to pay any and all collection expenses, legal fees, and interest charges stated above, I/we hereby, personally and severally, give this continuing Guaranty to _____ and will pay all bills that are not paid when due. Notwithstanding the fact this guaranty has been executed in corporate capacity, each signer is personally responsible for payment.

Signed _____ Signed _____

Print Name _____ Print Name _____

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Bank Reference Authorization (must be completed)

For the purpose of obtaining merchandise on credit, I authorize:

Bank Name _____ Banker _____

Bank Phone # _____ Bank Fax # _____
Please provide direct number for bank rather than toll-free general number Please provide direct fax number for bank rather than toll-free general number

City _____ State _____ Zip _____

to release information on my financial condition. PERSON ON BANK SIGNATURE CARD SIGNS BELOW.

Signature _____ Account # _____

Business Name _____ Position or Title _____ Date _____

**All applicants MUST fax a copy of their Tax Certificate to:
 (952) 854-7254**
 Applications received without an accompanying tax certificate will not be processed.

Minnesota Department of Revenue
 Sales and Use Tax Division
Certificate of Exemption ST-3

Purchaser: Complete this certificate and give it to the seller. Be sure to fill in the exemption code in the space provided.
Seller: Keep this certificate as part of your records. Incomplete certificates cannot be accepted in good faith.

Print or Type	Name of Authorized purchaser _____			MN tax ID number (if no number, state reason) _____
	Name of purchaser's business _____			Exemption code Resale
	Business address _____	City _____	State _____	Zip Code _____
	Name of seller from whom you are purchasing, leasing or renting merchandise Rubenstein & Ziff, Inc. and The Quiltworks Division			Check one: <input type="checkbox"/> Single purchase certificate <input checked="" type="checkbox"/> Blanket Certificate* <small>*If blanket certificate is checked, this certificate continues in force until cancelled by the purchaser.</small>
Business address _____	City _____	State _____	Zip Code _____	
	1055 American Blvd. E.	Minneapolis	MN	55420-1460

Describe your business and merchandise purchased	Describe the nature of your business or organization. Include a description of the merchandise normally sold in your business, if applicable. _____ _____
	Describe the merchandise for which you are claiming exemption. Fabrics and notions _____ _____

Sign Here	<i>I declare that the information on this certificate is correct and complete to the best of my knowledge and belief. (PENALTY-If you try to evade paying sales tax by using an exemption certificate for merchandise that will be used for purposes other than those being claimed, you may be fined \$100 under Minnesota law for each transaction for which the certificate is used.)</i>		
	Signature of Authorized purchaser _____	Title _____	Date _____

If you have questions, call the MN Department of Revenue at (612) 296-6181 or toll-free 1-800-657-3777.
 TDD users may call the department through the MN Relay Service at 7-1-1 or 1-800-627-3529; ask for (612) 296-6181