

TIMES PUBLISHING COMPANY

APPLICATION FOR CREDIT

FOR OFFICE USE ONLY

1	DATE _____	2	AMOUNT OF CREDIT REQUESTED _____
3	_____	4	_____
	BUSINESS NAME		d/b/a (TRADE STYLE)
5	_____	6	_____
	ADDRESS Street		BILLING MAILING ADDRESS Street
	City State Zip		City State Zip
7	_____		_____
	TELEPHONE NUMBER		TIMES ACCOUNT NUMBER

COMPANY PROFILE

8 Corporation _____ Partnership _____ Limited Partnership _____ Proprietorship _____ Franchise _____

9 Date you started business/assumed control: _____ 10 Nature/Type of Business _____

11 No. of Employees _____ 12 Name and Address of Previous Business or Employer _____

13 Officers or Principals

Name: _____	Title _____	SS# _____
Residence: _____	City: _____	State: _____ Zip: _____
Name: _____	Title _____	SS# _____
Residence: _____	City: _____	State: _____ Zip: _____

14 Has Corporation been registered with the Secretary of State? _____ What State? _____

Date of Filing _____

15 Have you previously advertised with us? _____ Under what name? _____

Account # _____ Date: _____

16 CREDIT REFERENCES: Media/Trade References:

Name	Street	City	State	Zip	Phone	Acct. #

17 BANK REFERENCE:

Name	Street	City	State	Zip	Phone	Acct. #

18 ADVERTISING AGENCIES: PLEASE ATTACH COPY OF INSERTION ORDER

19 I certify that the information provided in the application is true and correct. I hereby authorize the release of business or personal credit information requested by Times Publishing Company relevant to the above account.

20 ADVERTISING REQUESTED:
_____ Classified _____ Contract
_____ Retail _____ Size _____

Signature of Officer or Principal _____	Title _____	Date _____	Sales Representative _____
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PERSONAL GUARANTY OF PAYMENT

I (We) personally guarantee payment in full when due of any and all indebtedness of the above named Business to the Times Publishing Company (Tampa Bay Times), including collection costs and attorney's fees.

Date _____

Guarantor _____	Guarantor _____
SS# _____	SS# _____
Witness _____	Witness _____