

Northern Virginia Daily

P.O. Box 69, 152 N. Holliday Street, Strasburg, Virginia 22657

540-465-5137 • 540-869-2400 • 540-636-2053 • Fax 540-465-6155

— Application for Advertising Credit Account —

DATE _____

BUSINESS NAME _____ Federal Identification Number _____

STREET ADDRESS _____ P.O. BOX _____

CITY _____ STATE _____ ZIP _____

() _____ () _____

TELEPHONE _____ FAX _____

NATURE OF BUSINESS _____ Monthly Line of Credit applied for: _____

MANAGER/OWNER _____

() _____

TELEPHONE (HOME) _____ Social Security Number _____

References

BANK _____

ADDRESS _____

() _____ () _____

TELEPHONE _____ FAX _____ BANK ACCOUNT # _____

SUPPLIER _____ ACCOUNT # _____

ADDRESS _____

() _____ () _____

TELEPHONE _____ FAX _____

SUPPLIER _____ ACCOUNT # _____

ADDRESS _____

() _____ () _____

TELEPHONE _____ FAX _____

NEWSPAPER OR RADIO STATION _____ ACCOUNT # _____

ADDRESS _____

() _____ () _____

TELEPHONE _____ FAX _____

Individuals who are authorized to make charges to this account:

NAME _____ SIGNATURE _____

NAME _____ SIGNATURE _____

NAME _____ SIGNATURE _____

Credit Policy

Both parties hereby agree that all credit transactions made with the Northern Virginia Daily, published by Shenandoah Publishing House, Inc., are subject to the following terms and conditions: Upon submitting this form, the Northern Virginia Daily has the authorization to check on your credit rating by any means at our disposal. Cash in advance is expected until credit has been approved. Payment for each month's charges is due within 30 days of the invoice date. Payment is expected on a monthly basis. A service charge, as specified by state law, will be imposed on the unpaid balance of accounts 60 days past due date. No further credit will be extended to accounts which become 60 days past due date.

In the event that this account becomes delinquent and legal action becomes necessary, the undersigned agrees to pay the fee of the Northern Virginia Daily's attorney plus all court and collection costs.

Name of Applicant (Type or Print) _____

Signature of Applicant _____

Title of Applicant _____

Authorized to represent _____

Date of Application _____ (Name of Company) _____

Credit Application approved by: _____

Date of Credit Approval: _____