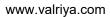


Confidential Credit Application

Company Information	<u>on</u>						
Company Name	DBA Name						
Bill Address			Fax#	÷			
			State	 خ	Zip		
Ship Address	Phone#						
			State	ž	Zip		
Years in Business	At Present Location Since						
Corporation	Sub S Corp	C-Corp		Partners	hip	Sole Proprietorship	
Officers:							
Name		Ti	itle				
Name		Ti	itle				
Name		Ti	itle				
Type Of Business							
Number of Employee	es						
Name Of Authorized	Buyer		ا	Resale # .			
Name of Accounts Payable Contact					Controller:		
•			A/P Email:				
Bank Reference							
Name	Address						
Phone	Fax Fax						
Bank Contact	tact Accou						
Trade Reference							
1. Name		Address					
City		State	Zip_		_		
Phone		Fax					
2. Name		Address					
City		State	Zip _				
Phone		Fax					
3. Name		Address					
City		State	Zip _		-=		
Phone		Fax					

Tel: (833)825-7492





The above information is given for the purpose of obtaining a credit accommodation and is warranted to be true. I/We hereby
authorize Valriya to investigate the references cited, pertaining to my/our credit and financial responsibility.
I further agree to pay to the terms cited on each Valriya invoice presented.

Tel: (833)825-7492

Signature of Company Officer	
Title	Date

Fax: (858)333-5898