

Publishers Printing Company



P.O. Box 37500, Louisville, Kentucky 40233
 100 Frank E. Simon Avenue, Shepherdsville, Kentucky 40165
 Telephone (800) 627-5801

Application for Account

Return completed Application to your Sales Representative

Business Contact Information

Company Legal Name:

DBA or Tradename:

Street Address:

PO Box:

City:

State:

Zip:

Shipping Address:

Telephone:

Email:

Fax:

Business Type: C-Corp S-Corp LLC Partnership Proprietorship Other _____

Year Firm Started:

Organized In:

Years at Address:

Present Ownership Since:

Parent Firm:

Percent Ownership:

Owners, Officers, General Partners

<u>Name</u>	<u>Ownership</u>	<u>Title</u>	<u>Email</u>
	%		
	%		
	%		

Contact for Payment:

E-Mail Address:

Purchase Order Required: Yes No (If Yes, supply any additional information we may need)

Deliver Invoices via: Mail Fax E-Mail Other

Fax #/E-Mail to use:

Payment Type (select all that apply): Check Wire Credit Card (See Notice below)

Purchases Subject to Sales Tax: Yes No

If no, complete and return attached Certificate of Exemption

NOTICE: All Pricing used in our Contracts, Proposals, Estimates and Invoices assumes payment made by check or ACH, in accordance with Terms of Payment, as established. If authorizing payment by Charge Card (Visa, MasterCard and American Express accepted) a 3% Administrative Fee applies, the adjusted sum being included on all invoices.

The undersigned represents that the information provided herein is true and accurate. This is NOT a credit agreement, and Printer extends no credit hereby. **Until Printer and Applicant execute a written credit agreement, all work requires prepayment ahead of receipt of all printing services.**

Applicant: _____

ACCEPTED by Publishers Printing Co., LLC

Signed by: _____

Signed By: _____

Title/Authority: _____

Title/Authority: _____

Date: _____

Date: _____

Over 145 Years of Specialized Service to Magazine Publishers

Publishers Printing Company



P.O. Box 37500, Louisville, Kentucky 40233
 100 Frank E. Simon Avenue, Shepherdsville, Kentucky 40165
 Telephone (502) 955-6526 • Fax (502) 955-5586

Credit Application

Review typically requires 3-5 business days. Some suppliers only respond in writing, which may delay the process further.
 Return completed Application to your Sales Representative

Complete, legal name of Applicant for Contracts, Invoices, Payments (must match Application for Account)

Address: _____

Amount of Credit Requested: _____ **Expected Annual Volume:** _____

Trade References

Printer and/or Paper Vendors (current and immediate past) desired. All other vendors, list only those currently used.

Company Name:

Contact Name:		Title:
Phone:	Fax:	E-Mail:

Company Name:

Contact Name:		Title:
Phone:	Fax:	E-Mail:

Company Name:

Contact Name:		Title:
Phone:	Fax:	E-Mail:

Company Name:

Contact Name:		Title:
Phone:	Fax:	E-Mail:

Bank Name/Address:

Phone:	Bank Used For (check all that apply): <input type="checkbox"/> Checking <input type="checkbox"/> Loans
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Bank Contact:	E-Mail:
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This is a Credit Application. Publishers Printing Co., LLC. ("Printer") extends NO credit hereunder. Printer extends credit, if any, only pursuant to a written offer of credit which must be executed by Printer and its customer. Until a fully executed written offer of credit is in place, Applicant must prepay for any printing services it receives. The undersigned hereby authorizes Printer to contact the Trade References above identified and any other persons, corporations, or firms Printer deems appropriate to determine the current or continuing credit worthiness of Applicant

Applicant: _____

Signed By: _____

Title/Authority: _____

Date: _____

Dear Customer:

An important step in setting up an account is to obtain instructions relating to Sales and Use Tax. We are presently required to impose Kentucky's 6% Sales and Use Tax on goods shipped from our plant for delivery to Kentucky addresses, unless appropriate exemption is first established. Other states can require the collection of their state's Sales and Use Tax, if a taxable nexus is established.

Kentucky, along with several other states, is a member of the Streamlined Sales and Use Tax Agreement (SSUTA). Several exemptions are allowed under this agreement (see Section #5 of the attached), the most commonly used being: A/B) Governmental Body, E) Charitable organization, F) Religious/Educational Organizations, G) Resale, I) Industrial Production/Manufacturing, J) Direct Pay Permit and K) Direct Mail. This latter exemption applies to materials mailed from our premises, directly to subscribers, or other entities.

To avail yourself of one of these exemptions, please complete the attached Certificate of Exemption, returning it with your completed Application(s). To be valid, all sections must be properly completed, including your state's sales tax exemption, or other permit number, next to the applicable selection in Section #5. If you do not possess an applicable number, mark "N/A."

The last page (Multi-State Supplement) must be completed if you are registered in a state(s) other than your own, and/or if you maintain a physical presence in other states.

Upon our receipt of a duly completed form, we will not collect Sales and Use Tax for Kentucky, or any other of the SSUTA's member-states claiming taxable nexus.

Any Sales or Use Tax found to be due on your products is your obligation.

If you have any questions, or if we can be of any further assistance, please contact our Controller, Al Hecker, at 800-627-5801, or by email at alh@pubpress.com.

Thank You,
Publishers Printing Co., LLC, Credit Department

This is a multi-state form. Not all states allow all exemptions listed on this form. Purchasers are responsible for knowing if they qualify to claim exemption from tax in the state that would otherwise be due tax on this sale. The seller may be required to provide this exemption certificate (or the data elements required on the form) to a state that would otherwise be due tax on this sale.

The purchaser will be held liable for any tax and interest, and possibly civil and criminal penalties imposed by the member state, if the purchaser is not eligible to claim this exemption. A seller may not accept a certificate of exemption for an entity-based exemption on a sale made at a location operated by the seller within the designated state if the state does not allow such an entity-based exemption.

1. Check if you are attaching the Multi-state Supplemental form.
 _____ If not, enter the two-letter postal abbreviation for the state under whose laws you are claiming exemption.
2. Check if this certificate is for a single purchase and enter the related invoice/purchase order # _____.

3. Please print

Name of purchaser			
Business Address	City	State	Zip Code
Purchaser's Tax ID Number	State of Issue	Country of Issue	
If no Tax ID Number Enter one of the following:	FEIN	Driver's License Number/State Issued ID Number	Foreign diplomat number
	State of Issue:	Number	
Name of seller from whom you are purchasing, leasing or renting			
Publishers Printing Co., LLC			
Seller's address	City	State	Zip code
100 Frank E. Simon Avenue	Louisville	KY	40165

4. Type of business. Circle the number that describes your business

- | | |
|---|---|
| <p>01 Accommodation and food services</p> <p>02 Agricultural, forestry, fishing, hunting</p> <p>03 Construction</p> <p>04 Finance and insurance</p> <p>05 Information, publishing and communications</p> <p>06 Manufacturing</p> <p>07 Mining</p> <p>08 Real estate</p> <p>09 Rental and leasing</p> <p>10 Retail trade</p> | <p>11 Transportation and warehousing</p> <p>12 Utilities</p> <p>13 Wholesale trade</p> <p>14 Business services</p> <p>15 Professional services</p> <p>16 Education and health-care services</p> <p>17 Nonprofit organization</p> <p>18 Government</p> <p>19 Not a business</p> <p>20 Other (<i>explain</i>) _____</p> |
|---|---|

5. Reason for exemption. Circle the letter that identifies the reason for the exemption.

- | | |
|--|--|
| <p>A Federal government (<i>department</i>) _____</p> <p>B State or local government (<i>name</i>) _____</p> <p>C Tribal government (<i>name</i>) _____</p> <p>D Foreign diplomat # _____</p> <p>E Charitable organization # _____</p> <p>F Religious or educational organization # _____</p> <p>G Resale # _____</p> | <p>H Agricultural production # _____</p> <p>I Industrial production/manufacturing # _____</p> <p>J Direct pay permit # _____</p> <p>K Direct mail # _____</p> <p>L Other (<i>explain</i>) _____</p> |
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6. Sign here. *I declare that the information on this certificate is correct and complete to the best of my knowledge and belief.*

Signature of Authorized Purchaser	Print Name Here	Title	Date
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Name of Purchaser

STATE	Reason for Exemption	Identification Number (If Required)
AR	_____	_____
IA	_____	_____
IN	_____	_____
KS	_____	_____
KY	_____	_____
MI	_____	_____
MN	_____	_____
NC	_____	_____
ND	_____	_____
NE	_____	_____
NJ	_____	_____
NV	_____	_____
OH	_____	_____
OK	_____	_____
RI	_____	_____
SD	_____	_____
TN	_____	_____
UT	_____	_____
VT	_____	_____
WA	_____	_____
WI	_____	_____
WV	_____	_____
WY	_____	_____

SSUTA Direct Mail provisions are not in effect for Tennessee.

The following nonmember states will accept this certificate for exemption claims that are valid in their respective state. SSUTA Direct Mail provisions do not apply in these states.

XX	_____	_____
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