



**Mathis Electronics, Inc.**  
PO Box 5871, Asheville, NC 28813  
Ph : 828-274-5925, Fx : 828-274-5928

**APPLICATION FOR CREDIT**

Name of Company or Individual Requesting Credit: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone number: \_\_\_\_\_ Years at this address: \_\_\_\_\_

The above named seeks credit in accordance with the terms and conditions of Mathis Electronics.

Credit terms for Mathis Electronics are: Net 30 days

Edmond L. Mathis  
Credit Manager

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**The following information must be provided. Confidentiality will be exercised.**

**OWNERSHIP:**

**Check one of the following:**

- Corporation                       Partnership  
 Incorporated within last 12 months     Individual

1. \_\_\_\_\_  
Name(s) of Principal(s)                      Complete Address                      zip code                      phone

2. \_\_\_\_\_  
Name(s) of Principal(s)                      Complete Address                      zip code                      phone

3. \_\_\_\_\_  
Name(s) of Principal(s)                      Complete Address                      zip code                      phone

**FINANCES:**

\_\_\_\_\_  
Name of Bank                      Bank Address

\_\_\_\_\_  
Bank Officer or Department                      phone

**REFERENCES:**

1. \_\_\_\_\_  
Name of Business                      Complete Address                      zip code                      phone

2. \_\_\_\_\_  
Name of Business                      Complete Address                      zip code                      phone

3. \_\_\_\_\_  
Name of Business                      Complete Address                      zip code                      phone

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We certify that all the information on this form is correct. We fully understand your credit terms and agree to the proper payment in consideration of extended credit.

(Signed): \_\_\_\_\_

Date: \_\_\_\_\_

(Title): \_\_\_\_\_