

**CREDIT SALES AGREEMENT**

Applicant certifies that the information submitted in the application above is true and correct and will be updated by Applicant in the event of any material change.

In order for DocuLex to consider extending credit to the Applicant, DocuLex must consult public and private sources to investigate Applicant's credit history. Applicant agrees that DocuLex is authorized to investigate the credit of Applicant and of any guarantor by and through all sources, including personal and telephone interviews with third parties such as business associates, financial sources and others with whom Applicant is acquainted or has done business. This investigation may include obtaining information about Applicant's and any guarantor's credit capacity, general credit reputation and past performance, whichever may be applicable. Applicant agrees that DocuLex shall retain the right to deny credit to Applicant at any time and that no credit shall be extended until and unless the extension of the credit is approved by DocuLex.

In the event that DocuLex extends credit to Applicant, Applicant agrees that all invoices for any sales or services rendered shall be paid as stated on the invoice. If the invoice is not paid within said period, it shall accrue interest at the rate of 1.5% per month simple interest. Failure to make payment within these terms may subject Applicant's account to credit restrictions and shall entitle DocuLex to pursue any other remedies available to it at law or in equity. Without limitation, in the event that DocuLex has extended credit terms to Applicant in exchange for software or related services, **all deferred payments shall become immediately due and payable and DocuLex is additionally authorized to terminate the availability of such software and/or services.** In the event any legal action is required, the Applicant agrees to pay all costs of collecting this account, including reasonable attorneys' fees and court costs, whether incurred by DocuLex in connection with collection, trial, appeal, bankruptcy or otherwise.

Applicant agrees that it shall read, understand and fully abide by the terms of all License Agreements delivered in connection with the software of DocuLex. All remedies provided to DocuLex in this Credit Sales Agreement and any License Agreements shall be cumulative, and not exclusive. No purchase order or other writing by Applicant shall supersede, terminate or replace the terms and conditions set forth in this Credit Sales Agreement and any such License Agreement.

By my signature below, I represent that I have the express authority to bind the Applicant under the terms and conditions of this Agreement.

Do you use Purchase Orders? \_\_\_\_\_ List persons authorized to buy on this account currently: \_\_\_\_\_ . Please update when changed.

By my signature below, I guarantee payment of this account promptly. I represent that I have the express authority to bind the applicant to the terms and conditions of this agreement.

Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

Corporate Officer \_\_\_\_\_ or Individually \_\_\_\_\_



P.O. Box 7378  
 Winter Haven, FL 33883  
 (863) 297-3691  
 (863) 297-5709 Fax

## CREDIT APPLICATION

### 1. Company Information

Full Legal Name/Business Entity	Phone Number	Fax Number	
Doing Business As (DBA)			
Billing Address (if different from above)	City	State	Zip
Company Type: <input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Franchisee <input type="checkbox"/> Corporation <input type="checkbox"/> Other _____			

### 2. Business Credit Information

Federal Tax I.D. (if incorporated)	Principal business of firm	Year business established
At present location since state?	Is business incorporated?	If so, under laws of what state?
Credit line requested	Incorporated for \$	

### 3. Bank References

Bank Name	Account #	Contact		
Address	City	State	Zip	Phone
Bank Name	Account #	Contact		
Address	City	State	Zip	Phone
Bank Name	Account #	Contact		
Address	City	State	Zip	Phone

### 4. Credit References

Company Name	Contact				
Address	City	State	Zip	Phone	
Company Name	Contact				
Address	City	State	Zip	Phone	
Company Name	Contact				
Address	City	State	Zip	Phone	

1. Proprietor Authorization

By signing this Application, I authorize DocuLex, Inc. or its agent to investigate my personal credit and financial records including my banking records. As part of such investigation, I authorize DocuLex to request and obtain consumer credit reports on me in connection with opening, monitoring, renewal and extension of this and other accounts with DocuLex and the marketing of other products and services to me and my business by DocuLex. I further authorize DocuLex to share the information received from my consumer credit report with DocuLex's parent, subsidiaries and affiliates (and other if applicable). If I request, you will tell me whether my consumer credit report was requested and, if so, the name and address of the consumer credit reporting agency that furnished the report.

First Name	Initial	Last Name	Social Security Number
Present Home Address			Home Phone Number
City		State	Zip
Authorized Signature			Date

First Name	Initial	Last Name	Social Security Number
Present Home Address			Home Phone Number
City		State	Zip
Authorized Signature			Date

2. Proprietor Guaranty

By signing this Application, I acknowledge that I have personally guaranteed the debts and obligations of my business and agree that I am personally obligated to perform all of the terms of, and make all payments to DocuLex required by, any agreement of which this Application is a part.

First Name	Initial	Last Name	Social Security Number
Present Home Address			Home Phone Number
City		State	Zip
Authorized Signature			Date

First Name	Initial	Last Name	Social Security Number
Present Home Address			Home Phone
City		State	Zip
Authorized Signature			Date