



P.O. Box 1967 Greenville, NC 27835
A Subsidiary of Cox Newspapers, Inc.

(252) 329-9500
FAX (252) 752-8181

REQUEST FOR CREDIT

Name of Legal Applicant:
Business Address
Home Address
Business Phone Number: Home Phone Number:
Former Address
Nature of Business
Business Classification: Proprietorship Partnership Corporation
Please list names and addresses of principals of company: S.S. #
Maximum Credit Requested

CREDIT REFERENCES

Bank Address
Type of Account: Checking Savings Loan
Account Number

Other References

* Please include Media references *
(Firms with which you already have established credit for at least one year)

1. Address
Account No. Telephone No.
2. Address
Account No. Telephone No.
3. Address
Account No. Telephone No.
4. Address
Account No. Telephone No.

Name of persons authorized to place advertising:
Send statements to:

As used below, the terms "I," "me " and "my" mean the applicant (s), jointly and severally; and "you" means Cox North Carolina Publications, Inc. You are authorized to make all inquiries to determine my creditworthiness. I authorize all creditors, credit bureaus and all other persons and entities to furnish information to you relating to my credit and any other information relevant to making a credit decision. I agree to furnish to you upon demand any and all financial information and statements requested by you from time to time. I authorize you to share your credit experience with other creditors, credit bureaus and others. If you grant my request for credit, you are authorized to establish my credit limit and to modify that credit limit from time to time as you shall determine in your sole discretion. I agree not to exceed my maximum

credit limit. I promise to pay to you, your successors and assigns, all credit advanced by you to me, together with any late charges imposed on my account as provided herein and all other costs and expenses incurred to collect any indebtedness from me, including, but not limited to, court costs and reasonable attorneys fees. If I fail to make a payment by the due date, I agree to pay a late payment charge equal to 1 _ % per month computed on the unpaid portion of the balance due less payments made or credits given. I agree that you have the right to terminate my credit if I am in default or breach any promise contained herein.

The undersigned hereby unconditionally guarantees to, Cox North Carolina Publications, Inc., the payment when due of all credit extended to the applicant by you. This is a guaranty of payment and not of collection and is the joint and several obligation of each guarantor. The undersigned waives (a) any requirement that any action be brought against the applicant or any other person or that resort be had to any security or collateral before enforcing this guaranty, (b) all rights which the undersigned might have under the provisions of North Carolina General Statute 26-7, et seq. and or any other law which would require a creditor to first attempt to recover against the applicant, and (c) presentment for payment, demand, notice of default and/or acceleration, protest, notice of protest, notice of nonpayment, notice of dishonor, and notice of any extension or modification. The undersigned agrees to be responsible for the costs of collection of any amounts due under this guaranty, together with reasonable attorneys' fees incurred by you in exercising your remedies hereunder. If any claim is made upon you for repayment of any amount received by you in payment of any indebtedness owed to you hereunder and you repay all or part of said amount by reason of any judgment or order of any court having jurisdiction or by reason of any settlement of any such claim, guarantor agrees that any such judgment, order or settlement shall be binding upon guarantor notwithstanding any revocation hereof or the cancellation of credit and guarantor shall be and remain liable to you hereunder for the amount so repaid or recovered as if such amount had never been received by you.

Signature

Signature

Name

Name

Address

Address

Date

Office Use Only

Application Accepted by: _____

Approved by: _____ Date: _____

Originator: _____ Dept: _____

Credit Limit Assigned : _____