



## **Customer Application**

DBA Name:				
Shipping Address:	City:		State:	Zip:
Billing Address:				
Business Phone:	Fax:	En	nail:	
Should we charge sales tax? Yes	No	Tax ID/Tax E	xempt ID:	
Accounts Payable manager:				
Accounts Payable Email:		Accoun	t Payable Phone:	
Payment Option: AHC Cred	it Card Check	Have you e	ver filed for bankrup	tcy? Yes No
Send my statement via: No Staten	nent (Pay by Invoice)	Email Fax	I Will Obtain Sta	atement Online
Ownership: Corperation LLC	Year	s in business:	DUNS#	
Bank Reference/Name of Bank:		_ Phone:	Type of Ac	ccount:
Trade Reference (Please list primary v	vholesaler on line one):			
Name	Address/City/State/2	<u>Z</u> ip	Account#	Phone
1				_
2				
3				
The undersigned agrees to pay service charges of 1.	5% per month or the highest lav	vful rate, whichever is lov	wer on any past due balance	, and all actual attorney fees
and costs of collection; bank draft of account when As an authorized official of the company, I authorize this provision. The undersigned also agrees to jurisd Pharmaceuticals LLC (Bonita). The undersigned here undersigned's bank, all credit references, and obtain Terms of sale have been fully explained, and I under my account is delinquent or exceeds my established subject of any proceedings by any government agen authorizes Bonita to take appropriate measures in v	account becomes delinquent.  all payments of existing and futiction and venue in Michigan. The by consents to confirmation of a nany necessary credit reports.  stand that if an account is establine of credit. The undersigned cy and agrees to notify the selle erifying the credit of the unders	ture obligations and unco ne above statements are the information containe dished, our credit line is s further represents that it or immediately upon the igned and releases Bonit	anditionally waive the right to made for the purpose of produced d herein and authorizes Bon subject to periodic review. All as professional licenses are in commencement of any such a from any obligation while i	o any amount paid pursuant ocuring credit from Bonita ita to contact the lso, shipments may be held in good standing and not the proceedings. The undersigneresearching this information.
As an authorized official of the company, I authorize this provision. The undersigned also agrees to jurisd Pharmaceuticals LLC (Bonita). The undersigned here undersigned's bank, all credit references, and obtain Terms of sale have been fully explained, and I under my account is delinquent or exceeds my established subject of any proceedings by any government agen authorizes Bonita to take appropriate measures in v Customer agrees to provide Bonita with 60 days not after the sale and customer agrees to refund in the for any shipping errors made or any products dama should be reported to Bonita Pharmaceuticals with shipping charges) for any return that was not damagnot eligible for any returns. To report the damage of	all payments of existing and futiction and venue in Michigan. The by consents to confirmation of a nany necessary credit reports.  stand that if an account is establine of credit. The undersigned cy and agrees to notify the selle erifying the credit of the undersice of its intention to sell all of its event there is no entitlement.  ged in transit by Bonita Pharmac in 2 business days of the receipted or sold in error by Bonita. Un	ture obligations and uncome above statements are the information contained lished, our credit line is suffered and releases Bonit its assets. Special contractions of the sale. The purchamauthorized returns, if an authorized re	anditionally waive the right to made for the purpose of produced herein and authorizes Bon subject to periodic review. All its professional licenses are incommencement of any such a from any obligation while it pricing is subject to verificant will be given to our custom ser shall be liable for a 20% by, shall not be processed for	o any amount paid pursuant ocuring credit from Bonita ita to contact the leso, shipments may be held if a good standing and not the proceedings. The undersigner esearching this information tion of entitlement at any timer. Any damage or error restocking fee (in addition to credit. Refrigerated items at
and costs of collection; bank draft of account when As an authorized official of the company, I authorize this provision. The undersigned also agrees to jurisd Pharmaceuticals LLC (Bonita). The undersigned here undersigned's bank, all credit references, and obtain Terms of sale have been fully explained, and I under my account is delinquent or exceeds my established subject of any proceedings by any government agen	all payments of existing and futiction and venue in Michigan. The by consents to confirmation of the any necessary credit reports.  It is a count is establine of credit. The undersigned cy and agrees to notify the selle erifying the credit of the undersice of its intention to sell all of its event there is no entitlement.  In a business days of the receipted or sold in error by Bonita. Under the products and to obtain the products and the products are producted to the products and the products are producted to the products and the products are producted to the products are producted to the product the produc	ture obligations and uncome above statements are the information contained the information contained the information contained the information contained to the information of the infor	anditionally waive the right to made for the purpose of produced herein and authorizes Bon subject to periodic review. Also professional licenses are incommencement of any such a from any obligation while it pricing is subject to verificate the will be given to our custom ser shall be liable for a 20% by, shall not be processed for thion, we strongly advise your	o any amount paid pursuant ocuring credit from Bonita ita to contact the leso, shipments may be held if a good standing and not the proceedings. The undersigner esearching this information. tion of entitlement at any ting the contact of the less are the less

## Please include a copy of your hospital pharmacy license, DEA license, and sales tax exemption (if applicable)

Calls to and from Bonita Pharmaceuticals, its divisions, and affiliates, may be monitored for quality assurance purposes. The Bonita Pharmaceuticals LLC, its divisions, and affiliates, may from time to time provide promotional information via phone, fax, or email to its customers. You may request to be removed from any of their channels by contacting Bonita by email, fax, or phone. The federal equal credit opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age, provided the applicant has the capacity to enter into a binding contact; because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the consumer credit protection act. The federal agency that administers compliance with this law concerning this creditor is Federal Trade Commission. Equal Credit Opportunity, Washington, D.C. 20580