

**\*\* Interactive Form \*\***  
This form can be filled in using  
your keyboard, before printing.

CUSTOMER SERVICE CENTER  
QUANTITY DISCOUNT DEPARTMENT  
P.O. BOX 93024  
LONG BEACH CA 90809-3024  
PHONE: 866.971.7337  
FAX: 310.604.6379  
E-MAIL: FINANCE@SEES.COM



**CREDIT APPLICATION**

See's Candies terms are net thirty (30) days and accounts with balances open beyond 30 days are considered delinquent. Interest of one percent (1%) per month accrues on the unpaid balance after 30 days and no candy is shipped until the account is brought current, including interest charges. If collection of the unpaid amount requires the services of an outside collection bureau, collection fees will be added to the unpaid principal amount. Such amount not to exceed 33%. In addition, the debt will be reported to the 3 major reporting agencies. Credit will not be extended at any See's Candies Retail shops.

Approval of credit is based upon verification of credit history. We will require a WRITTEN COMPANY PURCHASE ORDER FOR EACH ORDER when credit is approved. The application will not be processed unless all information is given and the authorized agent has signed it.

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**THE FOLLOWING COMPANY IS REQUESTING CREDIT FROM SEE'S CANDIES, INC.,  
QUANTITY DISCOUNT DEPARTMENT**

Company Name:

Street Address:

City/State/Zip:

Telephone:

e-mail:

Name of  
Authorized Agent:

Title:

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

Above signature authorizes See's Candies to obtain credit information from a credit reporting bureau and/or references listed below.

Type of Business:

What is the candy  
being used for?

How often will you  
be ordering  
candy?

- Weekly
- Monthly
- Quarterly
- Other

Anticipated  
Monthly  
Expenditure:

BUSINESS CREDIT REFERENCES

Name:

Street Address:

City/State/Zip:

Phone:

Contact:

Name:

Street Address:

City/State/Zip:

Phone:

Contact:

Name:

Street Address:

City/ State/Zip:

Phone:

Contact:

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BANK REFERENCE

Name of Bank:

Street Address:

City/State/Zip:

Phone:

Contact:

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For See's Use Only:

See's Sales Representative \_\_\_\_\_ Date: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date \_\_\_\_\_ Code \_\_\_\_\_