

How did you hear about Bossen? If other, please specify how.

- GOOGLE
 TRADE SHOW
 FAMILY/FRIEND
 NEWSLETTER
 FLYER
 OTHER

What product(s) are you interested in?

- BOBA ACADEMY
 BURSTING BOBA
 CUSTOM CUPS
 EQUIPMENT
 JELLY/JAMS
 PACKAGING
 POWDER MIXES
 SNOW ICE
 SYRUPS
 STORE SUPPLES
 TAPIOCA/CRYSTAL BOBA
 TEA

| | | | |
|--|--|---|---|
| LEGAL BUSINESS NAME | | DBA | |
| MAILING/BILLING ADDRESS | | CITY | STATE ZIP |
| SHIP TO STREET ADDRESS | <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> RESIDENTIAL | CITY | STATE ZIP |
| WHAT TYPE OF BUSINESS DO YOU HAVE/WILL HAVE? | | | |
| BUSINESS STRUCTURE | <input type="checkbox"/> CORPORATION DATE STARTED: _____ | <input type="checkbox"/> SOLE PROPRIETOR DATE STARTED: _____ | <input type="checkbox"/> OTHERS: _____ DATE STARTED: _____ |
| FEDERAL TAX ID# or SOCIAL SECURITY NUMBER | | RESALE NUMBER | BUSINESS LICENSE NUMBER |
| PURCHASING POINT OF CONTACT NAME | PHONE NUMBER | FAX NUMBER | EMAIL |
| ACCOUNTS PAYABLE CONTACT NAME | PHONE NUMBER | FAX NUMBER | EMAIL |
| OWNERS, PARTNERS OR OFFICERS | TITLE | PHONE NUMBER | |
| 1. | | | |
| 2. | | | |

| TRADE REFERENCE NAMES | CONTACT | ADDRESS | PHONE NUMBER | FAX NUMBER | EMAIL |
|-----------------------|---------|---------|--------------|------------|-------|
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |

| | |
|-------------------------------|--------------|
| BANK NAME | ADDRESS |
| BANK OFFICER | PHONE NUMBER |
| ACCOUNT TYPE / ACCOUNT NUMBER | FAX NUMBER |

By signing below, I hereby certify that the information provided above is correct and I authorize the release of credit information to LEADWAY INTERNATIONAL, INC. by our bank and trade references. I acknowledge that all products from LEADWAY INTERNATIONAL, INC is prohibited from resell or distribution without prior permission and approval. All LEADWAY INTERNATIONAL, INC. orders will be 'collect on delivery' (COD) bases unless otherwise stated in another formal agreement. LEADWAY INTERNATIONAL, INC. will not be responsible for damages/missing item(s) once the order is confirmed with a signature at the time of delivery. All refunds/exchanges must be made within 30 days of purchase. No refunds/exchanges for any equipment or opened/used item(s). A 20% restocking fee applies for item(s) returned within 30 days from purchase. A \$25 fee applies per bounced check and a 2% finance fee for past due balances.

| | | |
|-----------|----------------------|------|
| SIGNATURE | PRINTED NAME & TITLE | DATE |
| | | |