

## LibertyWare LLC Credit Application Packet

PO Box 160450 Freeport West Building E6 Clearfield, UT 84016-0450 USA Toll Free: (888) 500-5885 Office: (801) 825-5885 Fax: (801) 825-5875 www.libertywareusa.com

Dear Prospective Customer,

LibertyWare LLC looks forward to doing business with you. Included in this Credit Application Packet you will find nine pages, excluding this cover. It is critical that you answer all the questions on all of these forms. The first three pages are the actual Credit Application. The next page is LibertyWare LLC's Terms and Conditions. This is your legal agreement with LibertyWare LLC. Read this carefully and be sure to fill out all the needed information. Following the Terms and Conditions page you will find four pages, these four pages are the W-9 Forms that we must keep on file for your company, for compliance with Federal Law. The final form is a Credit Card Information Form. This form is required for Credit Card Processing. If you do not plan on paying by credit card this form isn't necessary.

There are three ways you can return this packet to LibertyWare LLC. You may fax this packet back to LibertyWare LLC at (801) 825-5875, you may email it to sales@libertywareusa.com, or you may mail the packet to...

LibertyWare LLC
Attn: Credit Department
PO Box 160450
Clearfield, UT 84016-0450

Upon positive review from your credit references and bank we will then set your company up on an open account.

Thank You For Your Business, LibertyWare LLC



# **LibertyWare LLC Credit Application**

PO Box 160450 Freeport West Building E6 Clearfield, UT 84016-0450 USA

> Toll Free: (888) 500-5885 Office: (801) 825-5885 Fax: (801) 825-5875 www.libertywareusa.com

| FOR INTERNAL USE ONLY |
|-----------------------|
| TERMS:                |
| DAYS:                 |
| CREDIT LIMIT:         |
| DATE:/ 20             |

| www.iiDi  | ertywareusa.com         | PLEASE                  | <b>ANSWER ALL QUESTIONS</b>          |
|---|-------------------------|-------------------------|--------------------------------------|
| FIRM NAME   | TRADE STYLE             |                         | PHONE NO: (INCLUDE AREA CODE)  ( ) - |
| STREET ADDRESS  |                         |                         | FAX NO: (INCLUDE AREA CODE)          |
| CITY  | STATE                   | ZIP CODE                | TOLL FREE NO:                        |
| ESTABLISHED IN: CORPORATION   | IF INCORPORAT           | ED, STATE IN WHICH INCO | PRPORATED:                           |
| D.U.N.S. NO: DIN  | VISION SUBSIDIARY       | PROPRIETORSHIP [        | PARTNERSHIP LIMITED PARTNERSHIP      |
| STATE SALES / USE TAX EXEMPTION NO.   | FEDERAL TAX ID NO. (FOR | CORP.) SSN (FOR PA      | ARTNERSHIP OR INDIVIDUAL)            |
| (Attach list if multi-state)  |                         |                         |                                      |
| FOR PARTNERSHIP OR INDIVIDUAL - LIST FULL NAME OF OWNER OR OWI  | NETO THE TOTAL ABBRESS  | u 211 CODE              |                                      |
| PARENT COMPANY - IF APPLICABLE  | TRADE STYLE             |                         | D.U.N.S. NO.                         |
| STREET ADDRESS  |                         |                         | PHONE NO: (INCLUDE AREA CODE)        |
| CITY  |                         | STATE                   | ZIP CODE                             |
| TYPE OF BUSINESS:   |                         |                         |                                      |
| ESTIMATED ANNUAL SALES: \$ ESTIMATED AN   | NNUAL PURCHASES: \$     | CRE                     | EDIT LINE REQUESTED: \$              |
| OUR TAX RETURNS HAVE BEEN CLEARED WITH THE TAXING AUTHORITIES   | S THROUGH:              |                         |                                      |
| INSURANCE CARRIER:  | CITY:                   |                         | STATE:                               |
| BANK REFERENCE  | SAVINO                  | GS ACCOUNT NO:          |                                      |
| BANK NAME:  | CHECK                   | ING ACCOUNT NO:         |                                      |
| STREET ADDRESS:   | LOAN A                  | ACCOUNT NO:             |                                      |
| CITY: STATE: ZIP:   | PHONE                   | NO: (Include Area Code) |                                      |
| INDIVIDUAL'S NAME:  | POSITI                  | ION                     |                                      |
| WE BELIEVE THAT OUR FIRM IS FINANCIALLY ABLE TO<br>INVOICES ACCORDING TO YOUR TERMS. PURPOSE<br>DISCLOSE CREDIT |                         | ING CREDIT, WE HER      | REBY AUTHORIZE OUR BANK TO           |
| NAME (PRINT):   | TITLE: _                |                         |                                      |

SIGNATURE: \_

\_\_ DATE:



## LibertyWare LLC Credit References Page 1

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> Toll Free: (888) 500-5885 Office: (801) 825-5885 Fax: (801) 825-5875 sales@libertywareusa.com

| REPEAT FIRM NAME:            |  |                                |   |
|------------------------------|--|--------------------------------|---|
| CREDIT REFERENCE ONE         |  |                                |   |
| COMPANY NAME:                | PHONE  | NUMBER:                        |   |
| FAX NUMBER:                  | YOUR A   | ACCT. NO:                      |   |
| STREET ADDRESS:              |  |                                |   |
| CITY:                        | STATE:   | ZIP:                           | _ |
| CREDIT REFERENCE TWO         |  |                                |   |
| COMPANY NAME:                | PHONE  | NUMBER:                        |   |
| FAX NUMBER:                  | YOUR #   | ACCT. NO:                      |   |
| STREET ADDRESS:              |  |                                |   |
| CITY:                        | STATE:   | ZIP:                           | _ |
| CREDIT REFERENCE THREE       |  |                                |   |
| COMPANY NAME:                | PHONE  | NUMBER:                        |   |
| FAX NUMBER:                  | Your A   | ACCT. NO:                      |   |
| STREET ADDRESS:              |  |                                |   |
| CITY:                        | STATE:   | ZIP:                           |   |
| INTERNATIONAL CUSTOMER       |  |                                |   |
| PLEASE ADVISE US OF ANY LOCA | L CONDITIONS PERTAINING TO R<br>THAT WE SHOULD BE AWARE OF | EMITTANCE OF FOREIGN EXCHANGE: | Ξ |
|                              |  |                                |   |
|                              |  |                                |   |
|                              |  |                                |   |



## LibertyWare LLC Credit References Page 2

PO Box 160450 Freeport West Building E6 Clearfield, UT 84016-0450 USA

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| REPEAT FIRM NAME:      |        |                  |        |
|------------------------|--------|------------------|--------|
| CREDIT REFERENCE FOUR  |        |                  |        |
|                        |        | DHONE NUMBER.    |        |
| COMPANY NAME:          |        |                  |        |
| FAX NUMBER:            |        | YOUR ACCT. NO: _ |        |
| STREET ADDRESS:        |        |                  |        |
| CITY:                  | STATE: |                  | _ ZIP: |
| CREDIT REFERENCE FIVE  |        |                  |        |
| COMPANY NAME:          |        | PHONE NUMBER: _  |        |
| FAX NUMBER:            |        | YOUR ACCT. NO: _ |        |
| STREET ADDRESS:        |        |                  |        |
| CITY:                  | STATE: |                  | _ ZIP: |
| CREDIT REFERENCE SIX   |        |                  |        |
| COMPANY NAME:          |        | PHONE NUMBER: _  |        |
| FAX NUMBER:            |        | YOUR ACCT. NO: _ |        |
| STREET ADDRESS:        |        |                  |        |
| CITY:                  | STATE: |                  | _ ZIP: |
|                        |        |                  |        |
| CREDIT REFERENCE SEVEN |        |                  |        |
| COMPANY NAME:          |        | PHONE NUMBER: _  |        |
| FAX NUMBER:            |        | YOUR ACCT. NO: _ |        |
| STREET ADDRESS:        |        |                  |        |
| CITY:                  | STATE: |                  | 7IP:   |



# LibertyWare LLC Terms and Conditions

PO Box 160450 Freeport West Building E6 Clearfield, UT 84016-0450 USA

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All invoices are due, in full, thirty days from date of invoice. An additional 1 - 1/2 %, per month, interest charge will be charged to all Invoices not paid within thirty days after due date; both before and after judgment and continuing each month until paid.

In the event of default, the undersigned agrees to pay all costs of collections and attorneys fees of 33% of the amount due, together with costs of court. All payments are payable in Davis County, Utah. No terms or conditions hereof may be changed except by written consent of LibertyWare LLC.

 $\rm I$  / We understand, acknowledge, and accept LibertyWare's terms of sale and certify that the information given herein is true and correct.

Company Name:

I / We hereby authorize you or your agent / representatives to secure a credit report and agree to the release of credit information. This authorization shall be continuing without expiration and a photocopy or fax copy shall be given the same effect as the original.

| By:  | Title:  |
|--|---|
| Signature:   | Date:   |
| here under, the undersigned jointly,<br>to the Order of LibertyWare LLC on o<br>to LibertyWare LLC. This is a continu<br>unaffected by any change in the ter | (hereinafter referred to as LibertyWare LLC) extending credit severally, and unconditionally guarantees and promises Pay demand, and all indebtedness of the above named applicant uing guarantee, and the obligations created hereby are ms of the original indebtedness between LibertyWare LLC we that of payment. All payments are payable in Davis |
|  | ragent / representatives to secure a credit report and agree This authorization shall be continuing without expiration and yen the same effect as the original.   |
| Signature:   | Title:  |
| Social Security Number:  |   |
|  |   |

## Form (Rev. January 2005) Department of the Treasury

## Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

| Internal                                       | evenue Service   |   |   |
|--|--|---|---|
| ge 2.  | Name (as shown on your income tax return)  |   |   |
| Print or type<br>Specific Instructions on page | Business name, if different from above   |   |   |
| r type   | Check appropriate box: Individual/ Sole proprietor Corporation Partnership Oth   | er <b>&gt;</b>  | Exempt from backup withholding                  |
| Print or type Instructions                     | Address (number, street, and apt. or suite no.)  | Requester's name and                                    | address (optional)                              |
| pecific  | City, state, and ZIP code  |   |   |
| See S  | List account number(s) here (optional)   |   |   |
| Part   | Taxpayer Identification Number (TIN)   |   |   |
| backu<br>alien,<br>your e                      | our TIN in the appropriate box. The TIN provided must match the name given on Line withholding. For individuals, this is your social security number (SSN). However, for a pole proprietor, or disregarded entity, see the Part I instructions on page 3. For other enployer identification number (EIN). If you do not have a number, see How to get a TII of the account is in more than one name, see the chart on page 4 for guidelines on where | resident htities, it is                                 | or  identification number                       |
| Part   |  | I_T_  |   |
| Under  | penalties of perjury, I certify that:  |   |   |
| 1. Th  | number shown on this form is my correct taxpayer identification number (or I am wai  | ting for a number to be i                               | ssued to me), and                               |
| Re   | n not subject to backup withholding because: (a) I am exempt from backup withholdin<br>renue Service (IRS) that I am subject to backup withholding as a result of a failure to r<br>fied me that I am no longer subject to backup withholding, and   |   |   |
| 3. I a   | n a U.S. person (including a U.S. resident alien).   |   |   |
| withho<br>For me<br>arrang                     | ation instructions. You must cross out item 2 above if you have been notified by the II ding because you have failed to report all interest and dividends on your tax return. Furtgage interest paid, acquisition or abandonment of secured property, cancellation of ment (IRA), and generally, payments other than interest and dividends, you are not reyour correct TIN. (See the instructions on page 4.)                                       | or real estate transaction<br>debt, contributions to an | s, item 2 does not apply. individual retirement |
| Sign<br>Here                                   | Signature of U.S. person ▶   | Date ▶  |   |

#### **Purpose of Form**

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

- **U.S. person.** Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:
- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee.

**Note.** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes you are considered a person if you are:

- An individual who is a citizen or resident of the United States
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or

• Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

**Foreign person.** If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the recipient has otherwise become a U.S. resident alien for tax purposes.

- If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:
- 1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
  - 2. The treaty article addressing the income.
- 3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.

Cat. No. 10231X Form **W-9** (Rev. 1-2005)

Form W-9 (Rev. 1-2005)

4. The type and amount of income that qualifies for the exemption from tax.

5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

**Example.** Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments (after December 31, 2002). This is called "backup withholding." Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

### Payments you receive will be subject to backup withholding if:

- 1. You do not furnish your TIN to the requester, or
- 2. You do not certify your TIN when required (see the Part II instructions on page 4 for details), or
- 3. The IRS tells the requester that you furnished an incorrect TIN, or  $\,$
- 4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
- 5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

#### **Penalties**

**Failure to furnish TIN.** If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

**Criminal penalty for falsifying information.** Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

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#### **Specific Instructions**

#### Name

If you are an individual, you must generally enter the name shown on your social security card. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

**Sole proprietor.** Enter your individual name as shown on your social security card on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name" line.

Limited liability company (LLC). If you are a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Treasury regulations section 301.7701-3, enter the owner's name on the "Name" line. Enter the LLC's name on the "Business name" line. Check the appropriate box for your filing status (sole proprietor, corporation, etc.), then check the box for "Other" and enter "LLC" in the space provided.

Other entities. Enter your business name as shown on required Federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name" line.

**Note.** You are requested to check the appropriate box for your status (individual/sole proprietor, corporation, etc.).

#### Exempt From Backup Withholding

If you are exempt, enter your name as described above and check the appropriate box for your status, then check the "Exempt from backup withholding" box in the line following the business name, sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

**Note.** If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

**Exempt payees.** Backup withholding is not required on any payments made to the following payees:

- 1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
- 2. The United States or any of its agencies or instrumentalities,
- 3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities.
- 4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
- 5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

6. A corporation,

Form W-9 (Rev. 1-2005)

- 7. A foreign central bank of issue,
- 8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
- 9. A futures commission merchant registered with the Commodity Futures Trading Commission,
  - 10. A real estate investment trust,
- 11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
- 12. A common trust fund operated by a bank under section 584(a),
  - 13. A financial institution,
- 14. A middleman known in the investment community as a nominee or custodian, or
- 15. A trust exempt from tax under section 664 or described in section 4947.

The chart below shows types of payments that may be exempt from backup withholding. The chart applies to the exempt recipients listed above, 1 through 15.

| IF the payment is for   | THEN the payment is exempt for   |
|---|--|
| Interest and dividend payments  | All exempt recipients except for 9   |
| Broker transactions   | Exempt recipients 1 through 13. Also, a person registered under the Investment Advisers Act of 1940 who regularly acts as a broker |
| Barter exchange transactions and patronage dividends                        | Exempt recipients 1 through 5  |
| Payments over \$600 required to be reported and direct sales over \$5,000 1 | Generally, exempt recipients 1 through 7 <sup>2</sup>  |

See Form 1099-MISC. Miscellaneous Income, and its instructions.

## Part I. Taxpayer Identification Number (TIN)

**Enter your TIN** in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

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If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-owner LLC that is disregarded as an entity separate from its owner (see *Limited liability company (LLC)* on page 2), enter your SSN (or EIN, if you have one). If the LLC is a corporation, partnership, etc., enter the entity's FIN

**Note.** See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at www.socialsecurity.gov/online/ss-5.pdf. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN online by accessing the IRS website at www.irs.gov/businesses/ and clicking on Employer ID Numbers under Related Topics. You can get Forms W-7 and SS-4 from the IRS by visiting www.irs.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note.** Writing "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

**Caution:** A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

<sup>&</sup>lt;sup>2</sup>However, the following payments made to a corporation (including gross proceeds paid to an attorney under section 6045(f), even if the attorney is a corporation) and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees; and payments for services paid by a Federal executive agency.

Form W-9 (Rev. 1-2005)

#### Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, and 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). Exempt recipients, see *Exempt From Backup Withholding* on page 2.

**Signature requirements.** Complete the certification as indicated in 1 through 5 below.

- 1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.
- 2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.
- **3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.
- **4. Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).
- 5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

## What Name and Number To Give the Requester

Page 4

| For this type of account:   | Give name and SSN of:  |
|---|--|
| 1. Individual   | The individual   |
| Two or more individ account)  | als (joint  The actual owner of the account or, if combined funds, the first individual on the account 1 |
| 3. Custodian account of (Uniform Gift to Mine   | rs Act)  |
| <ol> <li>a. The usual revocal<br/>savings trust (gradalso trustee)</li> </ol>   |  |
| b. So-called trust ac<br>that is not a legal<br>trust under state   | or valid   |
| 5. Sole proprietorship of single-owner LLC  | r The owner <sup>3</sup>   |
| For this type of account:   | Give name and EIN of:  |
| 6. Sole proprietorship of single-owner LLC  | r The owner <sup>3</sup>   |
| 7. A valid trust, estate, pension trust   | or Legal entity <sup>4</sup>   |
| Corporate or LLC el<br>corporate status on<br>8832  |  |
| Association, club, re<br>charitable, education<br>other tax-exempt or   | al, or   |
| 10. Partnership or multi-<br>LLC  | member The partnership   |
| 11. A broker or registere nominee   | d The broker or nominee  |
| <ol> <li>Account with the De<br/>of Agriculture in the<br/>a public entity (such<br/>state or local goverr<br/>school district, or pr<br/>receives agricultural<br/>payments</li> </ol> | name of as a ment, son) that   |

List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

**Note.** If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

#### **Privacy Act Notice**

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA, or Archer MSA or HSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, and the District of Columbia to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 28% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.

<sup>&</sup>lt;sup>2</sup>Circle the minor's name and furnish the minor's SSN.

You must show your individual name and you may also enter your business or "DBA" name on the second name line. You may use either your SSN or EIN (if you have one). If you are a sole proprietor, IRS encourages you to use your SSN.

List first and circle the name of the legal trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.)



# LibertyWare LLC Credit Card Information

PO Box 160450 Freeport West Building E6 Clearfield, UT 84016-0450 USA

Please complete the following information so we can process your order using the credit card of your choice.

Toll Free: (888) 500-5885 Office: (801) 825-5885 Fax: (801) 825-5875 sales@libertywareusa.com

| Date:  |  |   |
|--|--|---|
| Company Name:  |  |   |
| Address:   |  |   |
| City:  | State:   | Zip:  |
| Orders Submitted By:   |  |   |
| Phone #:   | Fax #:   |   |
| Card Type  |  |   |
| ☐ American Express   | ☐ Master Card  | ☐ Visa  |
| ORDER, ONLY WHEN S<br>ASE SUPPLY A PHOTO COPY OF Y<br>THE CARD BEING CHARGED TO<br>CARD TO BE SIGNED SO  | SPECIFIED, OR WHEN TERMS OUR CREDIT CARD SHOWIN  | G ARE PAST DUE.  G BOTH THE <u>FRONT AND B</u> ER. IT IS NECESSARY FOR  |
| ASE SUPPLY A PHOTO COPY OF Y<br>THE CARD BEING CHARGED TO  | SPECIFIED, OR WHEN TERMS OUR CREDIT CARD SHOWIN PAY FOR THE PENDING ORDE THAT WE CAN VERIFY THE S  | G ARE PAST DUE.  G BOTH THE <u>FRONT AND B</u> ER. IT IS NECESSARY FOR TO SIGNATURE BELOW.                      |
| ORDER, ONLY WHEN S  ASE SUPPLY A PHOTO COPY OF Y THE CARD BEING CHARGED TO CARD TO BE SIGNED SO  Card Information  Account No:   | OUR CREDIT CARD SHOWIN PAY FOR THE PENDING ORDE THAT WE CAN VERIFY THE S                           | G ARE PAST DUE.  G BOTH THE <u>FRONT AND BER.</u> IT IS NECESSARY FOR TO SIGNATURE BELOW.  -Code:               |
| ORDER, ONLY WHEN S  ASE SUPPLY A PHOTO COPY OF Y THE CARD BEING CHARGED TO CARD TO BE SIGNED SO  Card Information  Account No:  Expiration Date:   | OUR CREDIT CARD SHOWIN PAY FOR THE PENDING ORDE THAT WE CAN VERIFY THE S  V-                       | G ARE PAST DUE.  G BOTH THE FRONT AND BER. IT IS NECESSARY FOR TO SIGNATURE BELOW.  Code: Company Credit Card   |
| ORDER, ONLY WHEN S  ASE SUPPLY A PHOTO COPY OF Y THE CARD BEING CHARGED TO CARD TO BE SIGNED SO  Card Information  Account No:  Expiration Date:  Cardholder's Name:                                     | OUR CREDIT CARD SHOWIN PAY FOR THE PENDING ORDE THAT WE CAN VERIFY THE S  V V Personal Credit Card | G ARE PAST DUE.  G BOTH THE FRONT AND BER. IT IS NECESSARY FOR TO SIGNATURE BELOW.  Code:  Company Credit Card  |
| ORDER, ONLY WHEN S  ASE SUPPLY A PHOTO COPY OF Y THE CARD BEING CHARGED TO CARD TO BE SIGNED SO  Card Information  Account No:  Expiration Date:  Cardholder's Name:  Authorized Signature:              | OUR CREDIT CARD SHOWIN PAY FOR THE PENDING ORDE THAT WE CAN VERIFY THE S  V V Personal Credit Card | G BOTH THE FRONT AND BER. IT IS NECESSARY FOR TO SIGNATURE BELOW.  Code:  Company Credit Card                   |
| ORDER, ONLY WHEN S  ASE SUPPLY A PHOTO COPY OF Y THE CARD BEING CHARGED TO CARD TO BE SIGNED SO  Card Information  Account No:  Expiration Date:  Cardholder's Name:  Authorized Signature:  Print Name: | OUR CREDIT CARD SHOWIN PAY FOR THE PENDING ORDE THAT WE CAN VERIFY THE S  V V Personal Credit Card | G ARE PAST DUE.  G BOTH THE FRONT AND BER. IT IS NECESSARY FOR TO SIGNATURE BELOW.  -Code:  Company Credit Card |
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