

- New Account (Section 1 & 2)
- Change Account (Section 1 & 2)
- Credit Application (Section 1, 2 & 3)

Confidential

THE BUFFALO NEWS

A Division of OBH, Inc.
One News Plaza, P.O. Box 100
Buffalo, New York 14240

Buffalo.com

Account No.

Prospect No.

Insertions Ordered

COD Payment \$

Rep Name

No. Ext. Date

Section 1: New/Change Account Information (required)

Advertiser Legal Name <input type="text"/>		Phone No. <input type="text"/>	Fax No. <input type="text"/>
Legal Business address <input type="text"/>			Tax Identification No. <input type="text"/>
City <input type="text"/>	State <input type="text"/>	Zip Code <input type="text"/>	<input type="checkbox"/> Umbrella Account
Agency Name (if applicable) <input type="text"/>			Parent Account No. <input type="text"/>
			<input type="checkbox"/> Metro-Suburbia
			<input type="checkbox"/> American Publicitas

Section 2: Additional Contact Information (required if different then above)

Billing contact Name <input type="text"/>	Advertising contact Name <input type="text"/>
Billing Address <input type="text"/>	Advertising Address <input type="text"/>
City <input type="text"/> State <input type="text"/> Zip Code <input type="text"/>	City <input type="text"/> State <input type="text"/> Zip Code <input type="text"/>
Billing Phone No. <input type="text"/> Billing Fax No. <input type="text"/>	Billing Phone No. <input type="text"/> Billing Fax No. <input type="text"/>
E-mail Address <input type="text"/>	E-Mail Address <input type="text"/>

Section 3: Application for Credit (Required only if requesting credit consideration)

NOTE: If under 1 year in business a personal guarantee is required

Proprietorship
 Corporation
 General Partnership
 Limited Partnership
 Government
 Franchise
 Not for Profit

Trade: Years in Business No. of Employees Dunn & Bradstreet No.

Principals <small>(Owners, Partners, and/or Officers)</small>	Name <input type="text"/>	Title <input type="text"/>	Residence <input type="text"/>	SS# <input type="text"/>
	Name <input type="text"/>	Title <input type="text"/>	Residence <input type="text"/>	SS# <input type="text"/>
	Name <input type="text"/>	Title <input type="text"/>	Residence <input type="text"/>	SS# <input type="text"/>

Media/Trade References <small>(3 Required)</small>	Name <input type="text"/>	Address <input type="text"/>	Contact <input type="text"/>	Phone <input type="text"/>
	Name <input type="text"/>	Address <input type="text"/>	Contact <input type="text"/>	Phone <input type="text"/>
	Name <input type="text"/>	Address <input type="text"/>	Contact <input type="text"/>	Phone <input type="text"/>

Bank Information <small>C=Checking S=Savings M=Mortgage CPD=PlateDeposit</small>	Name <input type="text"/>	Type <input type="text"/>	Address <input type="text"/>	Contact <input type="text"/>	Phone <input type="text"/>
	Name <input type="text"/>	Type <input type="text"/>	Address <input type="text"/>	Contact <input type="text"/>	Phone <input type="text"/>
	Name <input type="text"/>	Type <input type="text"/>	Address <input type="text"/>	Contact <input type="text"/>	Phone <input type="text"/>

I certify that the information provided in the application is true and correct. I hereby authorize the release of credit information requested by THE BUFFALO NEWS relevant to the above account.

Signature title Date

To Be Filled Out by Advertising Department

SIC Code

Account Type RE GN CR CG Tear Sheet Yes No

Agreement Yes No

Insertion Date: \$

To Be Filled Out By Credit Department

Credit Approved
 Credit Denied
 PrePay

Personal Guarantee
 Review in 6 months
 No Reference Replied
 Need More Information

Approved By Date Credit Limit

To: The Buffalo News
A Division of Berkshire Hathaway, Inc.
One News Plaza
Buffalo, New York 14240

To whom it may concern:

For value received and in consideration of the credit that you may hereafter extend, the undersigned hereby jointly, severally and unconditionally guarantee payment when due, at your office in Buffalo, New York, of any and all present or future indebtedness owed to you by the applicant named on the reverse hereof, hereinafter called the debtor, and hereby agree punctually to pay such indebtedness if default in payments thereof be made by the debtor, plus attorney's fees of 25% of said amounts if placed for collection.

The undersigned expressly waives notice of acceptance of guarantee demand, and notice of non payment, and consents to any extension of time of payment of any and all of the indebtedness hereby guaranteed.

This guarantee shall continue to apply to all sales made, services rendered, and advances made by you to the debtor, and to all such present and future indebtedness however arising.

This is intended to be a personal guarantee and not a corporate guarantee, and will personally bind the signer notwithstanding any title or designation by me.

Witness Signature
Date

Guarantor Signature
Guarantor Social Security No.
Guarantor Address
Date

Witness Signature
Date

Guarantor Signature
Guarantor Social Security No.
Guarantor Address
Date