CREDIT APPLICATION

Account #_____ Approved_____
By_____

Kayton International Inc.
P.O. Box 308
Albion, NE 68620
Fax (402) 395-2558

Albion Crofton Neligh
(circle one)

Name_____ Spouse's Name_____
Address_____ Town_____ State_____ Zip_____
Business Name_____
Address_____ Town_____ State_____ Zip_____
Phone_____ Business Phone_____ Mobile_____
SS # _____ Years in Business _____ Age_____

References

Bank_____ Contact_____ Phone #_____
City_____ State_____ Zip Code_____

Additional Information

In the past 7 years have you had any unsatisfied judgments against you?	Yes	No
Have you declared bankruptcy in the last 10 years?	Yes	No
Have you had equipment repossessed in the last 7 years?	Yes	No
Are you a party to a lawsuit?	Yes	No
Are any accounts past due?	Yes	No
Do you have any loans, contracts, or accounts with us?	Yes	No

Applicant submits this application for the purpose of obtaining credit from Kayton International, Inc. Applicant herby (1) authorizes Kayton International, Inc. to investigate applicant's credit worthiness and or credit reports, (2) authorizes the above creditors to provide Kayton International, Inc. with any information that will assist Kayton International, Inc. in its credit inquiry.

Signed_____ Date_____