MANUFACTURER REGISTRATION



673 Avenue C, White City, OR 97503-1078 U.S.A.

The purpose of the this registration is to identify your firm as a manufacturer eligible for discounts. Please be sure to fill in all requested information completely and return to us with signature to avoid delay in processing your application & order.

YOU MUST FURNISH PROOF THAT YOU ARE A MANUFACTURER. EXAMPLES INCLUDE PHOTOS OF YOUR MANUFACTURING FACILITY, MAGAZINE ADS, PRODUCT PACKAGING, OR WEB SITE. A COPY OF YOUR LISTING IN THE YELLOW PAGES SHOULD BE INCLUDED, IF AVAILABLE.

Firm Name	
City/State/Zip	
	Fax No
E-Mail	Web Site
Your Name	Position with Firm
How long have you been in this business? _	Is location zoned for business?
List the Model/Hobby Magazines in which yo	ou advertise

MANUFACTURER TERMS

Minimum \$300.00 Net. No discounts will be applied to orders below \$300 Net. Kadee is not shipping overseas and other arrangements must be made and or shipped directly to the Manufacture on record. All orders will be charged all shipping & handling fees. No COD'S !!! No Drop shipping.

Please contact Alan Vezzani for current prices. Bulk pricing subject to change due to variable material & handling costs. OEM sales of Kadee® products are subject to managements discretion, as all products manufactured by Kadee® are not available for bulk sale. OEM prices are NET, and no further discounts are taken.

Items not sold in bulk that are used for manufacturing, can be purchased at a discount, contact us for details.

All orders must be in written form with a purchase order number &/or purchasers name either phoned, faxed or e-mailed to Kadee[®]. Payment by Debit or Credit VISA, MasterCard, Company Check, Cashiers Check or Money Order in US Dollars prior to sending the fulfilled order. A returned check fee of \$25 will be charged and accrued interest until paid in full.

MANUFACTURERS PAY ALL INSURANCE AND SHIPPING REGARDLESS OF LOCATION, AND ARE RESPONSIBLE FOR ALL TAXES, DUTIES, OR CUSTOM FEES.

\$2500 international package cap.



BACKGROUND INFORMATION



F .	NAME			TEL/FAX
R O M				YEARS IN BUSINESS
	CITY	STATE	ZIP	YEARS AT THIS LOCATION
O W N S E H R I	NAME			TITLE
	NAME			TITLE
	NAME			TITLE
				SOLE PROPRIETORSHIP
				TEL/FAX
B A	ADDRESS			ACCOUNT REP
N	CITY	STATE	ZIP	MONTHLY CREDIT DESIRED
K	CHECKING ACCT	SA	VINGS ACCT	LOC
				COUNT BILLING FOR AT LEAST ONE YEAR. TEL/FAX
T	ADDRESS			ACCT. NO
R A D E	CITY	STATE	ZIP	HOW LONG DEALT WITH
	NAME			TEL/FAX
	ADDRESS			ACCT. NO
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F				
E R				TEL/FAX
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N C E S	CITY	STATE	ZIP	HOW LONG DEALT WITH
	NAME			TEL/FAX
				ACCT. NO
I/WE CE	CITY	STATE STRUE AND CORRECT AN	ZIP ZIP	HOW LONG DEALT WITH
	SIGNED			
DATE	SIGNED		TITLE	
NOTE	: This application for credit will b			y by our cedit department.
	KADEE® USE ONLY			Data
	ences checked by			Date
	t approved by			Date
Credit refused by			Date	

Kadee® Quality Products Co., 673 Avenue C, White City, OR 97503-1078 U.S.A.