

CREDIT REQUEST

To: Ocala Breeders' Sales Co., Inc.
P.O. Box 99
Ocala, Florida 34478

Date

FROM:

Name

Farm Name

Address

Address

Telephone

Telephone

Social Security #

Tax ID #

NAME OF BANK _____

ADDRESS _____

TELEPHONE _____

Bank Officer to be Contacted _____

ACCOUNT # _____

Amount of Credit Requested _____

Additional Information _____

By signing this credit request the applicant authorizes Ocala Breeders' Sales Co., Inc. to perform a credit investigation.

Signature

PLEASE INFORM YOUR BANK THAT THE OCALA BREEDERS' SALES COMPANY WILL BE CONTACTING THEM ABOUT YOUR REQUEST FOR CREDIT.