

LAMATEK, Inc. Contact Information

Thank You for Choosing LAMATEK!

For Quotes and Orders:

Customer Service	
Nadiya Netrobov OEM Sales Mgr.	nadiya@lamatek.com 856 599 6000 ext. 116
Kim Verzilli Customer Service Specialist	Orders@lamatek.com 856 599 6000 ext. 118

Quality Assurance Department	
Terri Chicosky Quality Manager	terri@lamatek.com 856 599 6000 ext. 113

Accounting Department	
Patrick Rindt Credit & AR	credit@lamatek.com 856 599 6000 ext. 105 Contact for: Credit Applications and Billing Issues
Monique Woods Accounting Manager	mwoods@lamatek.com 856 599 6000 ext. 124 Contact for: EFT/ Wires
Christine Ronkin, CPA Controller	cronkin@lamatek.com 856 599 6000 ext. 103 Contact for: Final Collection and Credit Issues

Options for Credit Terms:

Credit Card: Immediate approval – no references needed.

Credit card is authorized, but not charged until order is shipped.

- Fill out Credit Card Form and sign.

Cash in Advance: Approval when remittance is received by LAMATEK – no references necessary.

Order is processed when funds are received.

- Send funds to LAMATEK per payment options below.

Net 30: References and credit application required - Approval process is generally 3-5 days depending on response time from customer's references.

Payment is due within 30 days of shipment per payment options below.

- Complete Credit Application and fax or email to LAMATEK.

Payment Options:

Check payable to: LAMATEK, Inc
1226 Forest Parkway
West Deptford, NJ 08066-1728

Bank ACH or Wire: send request for banking information to Credit@Lamatek.com

Thank you for choosing LAMATEK!

Here is a checklist of what is needed to get you set up:

Please provide:

- IRS Form W-9
- Sales Tax Exempt Certificate (if applicable)

Select billing preference:

- E-invoice _____
Backup
email _____
- Fax _____
- Mail _____

Choose Terms for Credit:

- Credit Card (No references)
- Cash in Advance (Order entered when funds are received by LAMATEK)
- Net 30 (Credit Application needed)

Select Payment Option:

- Mail in Check
- Credit Card (Credit Card terms only)
- Bank ACH (no customer fee)
- Bank Wire (customer fee)

Please make all checks payable (in US Funds only) to:

LAMATEK Inc.
1226 Forest Parkway
West Deptford, NJ 08066-1728



Quality & Service, Bonded Together

FOR OFFICE USE ONLY

Customer # _____

Order # _____

Credit Card Form

Please complete the required information and email (Credit@lamatek.com) or fax back to 856-599-6010

Billing Information

Company Name _____

Billing Contact _____

Address _____

City/State/Zip _____

Phone _____

E-mail _____

Fax _____

Invoice Method

E-mail _____

Backup _____

Fax _____

Mail _____

Item #	Description	QTY	Base Price	Total
OFFICE USE ONLY			Shipping Amt.	
ORDER TOTAL:				

Credit Card #

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Name on Card _____

Expiration Date (MM/YY) _____ / _____ CSU Code _____

Signature _____ Date _____

SHIPPING Information

(if different than billing address)

Company Name _____

Contact Person _____

Address _____

City/State/Zip _____

Phone _____

Email _____

same as billing

SHIPPING METHOD

- Standard Ground
- 3-Day
- 2-Day
- Next Day
- Next Day A.M.
- Ship via UPS Acct. # _____

CONFIDENTIAL CREDIT APPLICATION

Customer Information		
Company Name:	Federal Tax ID #	Date:
Billing Address:		
Billing Contact Name:	State and Year of Incorporation:	
Billing E-mail:	Billing Telephone:	
Additional Billing Contact: (Controller, AP Supervisor)	Additional Billing E-mail:	
Credit Line Requested	<i>Type of Organization:</i> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/>	
<input type="checkbox"/> IRS Form W-9 attached	<input type="checkbox"/> Sales Tax Exempt Cert. Attached	<input type="checkbox"/> Not Tax Exempt

List Trade References Below (or attach your own reference sheet)	
Name	Name
Address	Address
City/State/Zip	City/State/Zip
Contact E-mail	Contact E-mail
Phone #	Phone #
Fax #	Fax #
Name	Name
Address	Address
City/State/Zip	City/State/Zip
Contact E-mail	Contact E-mail
Phone #	Phone #
Fax #	Fax #



Quality & Service, Bonded Together

Bank Reference (use additional pages if necessary)	
Name of Financial Institution:	
Address:	
City/State/Zip:	
Fax #	Phone #
Contact E-mail	
Checking Account #	Saving Account #
Loan Account #	
Filed bankruptcy in the last 3 years? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when and where?	
Any litigation pending against Applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, attach additional page (s) and describe.	

CREDIT POLICY:

Payment terms are net thirty (30) days from date of invoice, unless otherwise stated. All payments must be in US Funds. Delinquent accounts that remain unpaid beyond sixty (60) days will be placed on "Credit Hold". While an account is on Credit Hold, no orders will be shipped until past due invoices are remedied. Accounts consistently on Credit Hold or over sixty (60) days old will be placed on permanent cash in advance or Credit Card.

AGREEMENT:

The undersigned, being a duly authorized representative of the company named above does hereby make application to LAMATEK, Inc. for credit. We warrant the information shown above to be true and complete. We authorize LAMATEK, Inc. to investigate references herein, statements, or other data obtained from us or from any other person pertaining to our credit and financial responsibility. We agree to honor the payment terms as stated in the above Credit Policy and guarantee to pay all amounts when due. We agree to notify LAMATEK, Inc. of any allegedly defective product received from LAMATEK, Inc. and of any discrepancy with any invoice within **30 days** of receipt and that the failure to notify LAMATEK, Inc. of any such defect or discrepancy within the 30 day period waives any and all rights to raise such defect or discrepancy at a later date. **It is further agreed that in the event of such suit or action, same shall take place in Gloucester County, New Jersey and that New Jersey laws shall govern all collection activity.**

*Signature _____ Printed _____

*Title _____ Date _____

***Required.**

Return to: LAMATEK Credit Dept.
Fax: 856-599-6010
Email: credit@lamatek.com

Please provide your company's IRS Form W-9 and Sales Tax Exempt Use Certificate with this application.

LAMATEK, Inc.

1226 Forest Parkway, West Deptford, NJ 08066-1728 – Tel: (856)599-6000 / Fax: (856) 599-6010

Request for Taxpayer Identification Number and Certification

**Give Form to the
requester. Do not
send to the IRS.**

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
	5 Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	6 City, state, and ZIP code	LAMATEK, Inc. 1226 Forest Parkway West Deptford, NJ 08066
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number									
				-			-		
or									
Employer identification number									
				-					

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

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. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.