



# JM PACKAGING

## DETROIT TAPE & LABEL

26300 BUNERT, WARREN, MI 48089  
(586) 771-7800 FAX (586) 771-5440

### APPLICATION FOR CREDIT

PLEASE ANSWER ALL QUESTIONS. WHEN NO FIGURES ARE INSERTED, WRITE "NONE".

FIRM NAME <b>Mandatory Poster Agency DBA: Labor Law Poster Service</b>		TRADE STYLE	
STREET ADDRESS <b>5859 W. Saginaw Hwy. #343</b>		PHONE <b>(517) 321-4144</b>	
CITY <b>Lansing</b>	STATE <b>MI</b>	ZIP CODE <b>48917</b>	
FULL NAME OF OWNER OR OWNERS (OR AN AUTHORIZED OFFICER OF CORPORATION) LIST HOME ADDRESS & ZIP CODE FOR PARTNERSHIP OR INDIVIDUAL <b>Joseph Fata*, Thomas Fata, Steven Fata</b>			
<b>*4337 Blackberry Ln., Lansing, MI 48917</b>			
CHECK ONE:	INDIVIDUAL	PARTNERSHIP	CORPORATION
			<input checked="" type="checkbox"/>
FED. TAX NO. <b>38-3468792</b>		SPOUSE'S NAME (INDIV. ONLY)	
Additional Information required for conditional sales contracts under the uniform commercial code			
DEBTOR (INDIVIDUAL SIGNING CONTRACT) <b>Joseph Fata*</b>		TITLE: <b>Vice President</b>	
DEBTOR'S SOCIAL SECURITY # (For partnership or individual) <b>138-56-8771</b>			
TYPE OF BUSINESS <b>Labor requirement posters</b>		DATE STARTED <b>January 1, 1999</b>	
FORMER BUSINESS <b>none</b>		LOCATION <b>none</b>	
OWN OR RENT BUILDING <b>none</b>		VALUE <b>none</b>	
REAL ESTATE MORTGAGE <b>none</b>			
TRADE REFERENCES			
NAME	ADDRESS	PHONE	
<b>BRD Printers</b>	<b>912 W. St. Joseph, Lansing, MI 48917</b>	<b>(517) 372-0268</b>	
<b>DBI Office Supplies</b>	<b>912 E. Michigan Ave. Lansing, MI 48912</b>	<b>(517) 267-8069</b>	
<b>Cascade Paper Converters, LLC</b>	<b>4935 Starr St. SE Grand Rapids MI 49331</b>	<b>(616) 974-9165</b>	
NAME OF BANK <b>Capital National Bank</b>	CITY <b>Lansing</b>	STATE <b>MI</b>	ZIP CODE

APPLICANT'S SIGNATURE ATTESTS FINANCIAL RESPONSIBILITY, ABILITY AND WILLINGNESS TO PAY OUR INVOICES IN ACCORDANCE WITH THE FOLLOWING TERMS: NET 30 DAYS

**PAYMENT DELINQUENCY** - Buyer agrees to pay Seller interest at the rate of 1 1/2% per month (or such other rates as is permitted by applicable laws) on any unpaid balance in the event of buyer's default in payment in accordance with scheduled payment dates and amounts. Buyer further agrees that upon any such default Seller may declare entire amount due and enforce collection of all amounts outstanding irrespective of any other provisions contained herein, including provisions for deferred or installment payment. Buyer agrees to pay all costs and expenses incident to default to the terms herein and relating to the collection of amounts owed hereunder, including attorney's fees.

THE ABOVE INFORMATION IS FOR THE PURPOSE OF OBTAINING CREDIT AND IS WARRANTED TO BE TRUE. WE HEREBY AUTHORIZE THE FIRM TO WHOM THIS APPLICATION IS MADE TO INVESTIGATE THE REFERENCES LISTED PERTAINING TO MY/OUR CREDIT AND FINANCIAL RESPONSIBILITY.

Firm Name

**MPA DBA: LPS**

By

**Joseph E. Fata V.P.**

TITLE

By

TITLE

## Michigan Sales and Use Tax Certificate of Exemption

TO BE RETAINED IN THE SELLER'S RECORDS - DO NOT SEND TO TREASURY.

This certificate is invalid unless all four sections are completed by the purchaser.

### SECTION 1: CHECK ONE OF THE FOLLOWING

☐ One time purchase

☒ Blanket certificate (Note: A blanket certificate is valid for four years from the date of signature unless an earlier expiration date is listed below)  
Expiration date, if less than four years: \_\_\_\_\_

The purchaser hereby claims exemption on the purchase of tangible personal property and selected services made under this certificate from Mandatory Foster Agency DBA: Labor Law Poster Service and certifies  
(Vendor's Name)  
that this claim is based upon the purchaser's proposed use of the items or services, or the status of the purchaser.

### SECTION 2: ITEMS COVERED BY THIS CERTIFICATE

☒ All items purchased

☐ Limited to the following items: \_\_\_\_\_

### SECTION 3: BASIS FOR EXEMPTION CLAIM

- ☒ For Resale at Retail - Sales Tax Registration Number: 38-3468792  
☐ For Resale at Wholesale - No Tax Number Required  
☐ For Lease - Use Tax Registration Number: \_\_\_\_\_  
☐ Agricultural Production \_\_\_\_% - No Tax Number Required (Describe) \_\_\_\_\_  
☐ Industrial Processing \_\_\_\_% - No Tax Number Required  
☐ Government Entity, Nonprofit School, Nonprofit Hospital, and Church (Circle type of organization.)  
☐ Nonprofit Internal Revenue Code Section 501(c)(3) and 501(c)(4) Exempt Organizations (Attach copy of IRS letter ruling).  
☐ Nonprofit Organizations with an Exempt letter from the State of Michigan (Attach a copy of State's letter)  
☐ Multiple Points of Use (claim ONLY for electronically delivered software - purchaser assumes tax payment obligation)  
☐ Direct Mail (delivered to multiple taxing jurisdictions - purchaser assumes tax payment obligation)  
☐ Other (explain): \_\_\_\_\_

### SECTION 4: CERTIFICATION

I declare, under penalty of perjury, that the information on this certificate is true, that I have consulted the statutes, administrative rules and other sources of law applicable to my exemption, and that I have exercised reasonable care in assuring that my claim of exemption is valid under Michigan law. In the event this claim is disallowed, I accept full responsibility for the payment of tax, penalty and any accrued interest, including, if necessary, reimbursement to the vendor for tax and accrued interest.

Mandatory Foster Agency DBA: Labor Law Poster Service  
Purchaser Street Address  
(517) 321-4144 Lansing MI 48917  
Area Code / Telephone No. City State Zip Code  
Michael A. Bishop Operations Mgr. 9/29/14  
Signature and Title Date Signed  
Michael Bishop 38-3468792  
Name (Print or Type) Social Security No. or FEIN