



the **alpha** companies  
motion picture rentals

## CREDIT APPLICATION

<b>PRODUCTION:</b>		<b>SHOWNAME:</b>		
PARENT CO. (IF SUBSIDIARY)				
CIRCLE ONE:	FEATURE	PILOT	M.O.W.	T.V. EXPECTED RUN:
ESTIMATED PROD. START DATE:		WRAP DATE:		RELEASE DATE:
BUDGET:		CAST:		

<b>DIRECT ALL INVOICES TO:</b>		<b>CORPORATE OFFICE - POST PRODUCTION:</b>	
_____		_____	
_____		_____	
_____		_____	
PHONE:	FAX:	PHONE:	FAX:
CONTACT:		CONTACT:	

**CORPORATION PRINCIPLES:**

1. NAME:	TITLE:	PHONE:
2. NAME:	TITLE:	PHONE:
NAME OF PRODUCTION ACCOUNTANT:		PHONE:
SET DECORATOR(S):	PROD. COORD.:	
LEADMAN:	PROP. MASTER:	
LIST THOSE PERSONS AUTHORIZED TO ISSUE PURCHASE ORDERS:		
NAME/TITLE:	NAME/TITLE:	
NAME/TITLE:	NAME/TITLE:	

**BANK REFERENCE: \*\*\*PLEASE COMPLETE**

NAME:	BRANCH/PHONE #:
DATE OPENED:	BALANCE:
ACCOUNT NUMBER(S):	

**TRADE REFERENCES: (PROP HOUSES & FURNITURE RENTALS MINIMUM OF 6 MONTH RELATIONSHIP)**

1. BUSINESS NAME:	2. BUSINESS NAME:
PHONE:	PHONE:
1. BUSINESS NAME:	3. BUSINESS NAME:
PHONE:	PHONE:

I do hereby state that all information stated above is true and correct, and agree to all terms and conditions of rentals and sales contained here and within other published policies of: **THE ALPHA COMPANIES (ALPHA MEDICAL RESOURCES, INC., ALPHA II FURNITURE RESOURCES, INC., SPELLMAN DESK, INC.)**

<b>SIGN:</b>	<b>TITLE:</b>	<b>DATE:</b>
_____	_____	_____