Please fill out this section only if you are NOT paying in full at the time of order.

## $\frac{CREDIT\ AGREEMENT}{(\text{please print})}$

Middle

Last

Name

First

**Customer Signature:** 

upon default\*

Home Address			7
City	State	z	ip
Phone ()	Alt. Phone (	)	
Social Security # (*required)	Date	of Birth:_	
Place of Employment			mm / dd / yyyy
Name of nearest relative not living with you (*required)			
A 11			
Address	174.100		
City/State/Zip	Phone (	()	
n mings 1			
Credit Information (*required)			
Credit Card Number			
Expiration Date			
Credit References			
Business Name			
Your Account #			
Tour Account #	<del></del> -		
Credit Terms:			
Should you need to finance your p	urchase, the following	g applies:	One-third of total
contract amount is due at the time of	of ordering and 3 mor	e payment	s are due monthly.
for a total of 4 payments*. If you ne	ed extended payment	options, v	ve will try our bes
to accommodate you (see reverse s	ide for alternative cre	edit option	s). In the event of
default on your payment schedule,	Lloyds will have the	authorizat	ion to charge your
credit card accordingly. In the event	of further default Llo	yds reserv	es the right to sub-
mit your account to collection, and y	you will be responsible	le for the c	contract amount, as
well as all collection fees.		o serrage a recession	
I agree to the above stated terms and	d am entering into a c	ontract for	a period of
months, and my regular minimum principal amount financed is: \$	n monthly payments The first payment	is due 30 c	ays after delivery.

This is an authorization to charge your credit card per above terms or for full payment

\*Any unpaid balances are subject to a 1.5% monthly interest charge (18% annually).