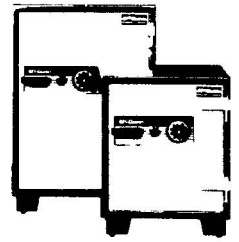


PROVINCIAL LOCKSMITH

(519) 667-4916

572 Dundas St
LONDON, Ontario
N6B 1W8



PLEASE LIST MY ACCOUNT AS:

INVOICE TO: _____

ADDRESS _____ PHONE _____

CITY _____ PROV _____ POSTAL CODE _____

SHIP TO: _____

ADDRESS _____ PHONE _____

CITY _____ PROV _____ POSTAL CODE _____

CORPORATION _____ PARTNERSHIP _____ PROPRIETORSHIP _____

OFFICERS/PARTNERS:

NAME _____ ADDRESS _____

NAME _____ ADDRESS _____

DATE BUSINESS STARTED _____ NUMBER OF OFFICE EMPLOYEES _____

TRADE REFERENCES:

NAME _____

ADDRESS _____ PHONE _____

CITY _____ PROV _____ POSTAL CODE _____

NAME _____

ADDRESS _____ PHONE _____

CITY _____ PROV _____ POSTAL CODE _____

BANK REFERENCE:

NAME _____

ADDRESS _____ PHONE _____

CITY _____ PROV _____ POSTAL CODE _____

TERMS: I understand that your terms are net 30 days from date of invoice and that no shipment is normally made on delinquent accounts. I agree to keep within these terms if granted an open account. Should this account ever become delinquent and it would be necessary to employ an agent for collection, I or we agree to pay a reasonable additional sum for collection costs. The title, or proceeds from the sale of all merchandise remains with PROVINCIAL LOCKSMITH INC. and all risk of loss is accepted by the customer until the purchase price and all charges are paid in full.

NAME: _____ SIGNATURE: _____ TITLE: _____

(Please Print)