

DATE: _____ REP: _____ <input type="checkbox"/> CUSTOM ONLY DEALER	<input type="checkbox"/> PARADIGM <sup>®</sup> <input type="checkbox"/> PARADIGM <sup>®</sup> REFERENCE <input type="checkbox"/> ANTHEM <sup>®</sup>	<input type="checkbox"/> OPEN ACCOUNT <input type="checkbox"/> FLOORING <input type="checkbox"/> CIA	<input type="checkbox"/> CREDIT CARD <small>(Authorization Form required, available on Dealer Website)</small>
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**Note: This Form Must Be Completed In Full To Be Accepted.**

<b>LEGAL NAME</b> _____ DBA _____ STREET _____ P.O. BOX _____ CITY/STATE/ZIP _____ / _____ / _____ PHONE (____) _____ - _____ FAX (____) _____ - _____ EMAIL _____ _____ OWNER(S) _____ MANAGER _____ PAYABLE MGR _____ YRS IN BUSINESS _____ YRS AT PRESENT LOCATION _____	<b>SHIP TO</b> _____ <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL STREET _____ CITY/STATE/ZIP _____ / _____ / _____ PHONE (____) _____ - _____ <b>EMAIL FOR UPS TRACKING ONLY</b> _____ _____ BANK _____ STREET _____ CITY/STATE/ZIP _____ / _____ / _____ BANK ACCT#(S) _____ _____ BANK CONTACT _____ PHONE (____) _____ - _____
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### Current Main Product Lines

SPEAKERS		ELECTRONICS		VIDEO	
1 _____	4 _____	1 _____	4 _____	1 _____	4 _____
2 _____	5 _____	2 _____	5 _____	2 _____	5 _____
3 _____	6 _____	3 _____	6 _____	3 _____	6 _____

### Active Trade References

NAME _____ CITY/STATE/ZIP _____ / _____ / _____ _____ LOCAL PHONE* (____) _____ - _____ FAX (____) _____ - _____	NAME _____ CITY/STATE/ZIP _____ / _____ / _____ _____ LOCAL PHONE* (____) _____ - _____ FAX (____) _____ - _____
NAME _____ CITY/STATE/ZIP _____ / _____ / _____ _____ LOCAL PHONE* (____) _____ - _____ FAX (____) _____ - _____	NAME _____ CITY/STATE/ZIP _____ / _____ / _____ _____ LOCAL PHONE* (____) _____ - _____ FAX (____) _____ - _____

**\*LOCAL PHONE ONLY—TOLL FREE PHONE NUMBERS ARE NOT ACCESSIBLE FROM CANADA**

**Paradigm Electronics Inc.**

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