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| <b>OFFICIAL COMPANY NAME:</b>  |                   |                      |                      |
| <b>OFFICIAL COMPANY NAME SHOULD INCLUDE NO ABBREVIATIONS AND SPECIFY TYPE OF BUSINESS. EXAMPLE: LLC, CO, INC, LTD</b>  |                   |                      |                      |
| <b>PHYSICAL OFFICE ADDRESS:</b>  |                   |                      |                      |
| <b>ADDRESS SHOULD BE COMPLETE WITH CITY, STATE AND ZIP-PHYSICAL IS CRUCIAL DUE TO LOCAL SALES AND USE TAX.</b>   |                   |                      |                      |
| <b>LOCAL MAILING ADDRESS:</b>  |                   |                      |                      |
| <b>CORPORATE MAILING ADDRESS:</b>  |                   |                      |                      |
| <b>YARD ADDRESS:</b>   |                   |                      |                      |
| <b>THE YARD ADDRESS IS WHERE MOST OF THE JOBS AND WORK ARE PERFORMED FOR THIS COMPANY. NOT ALL COMPANIES HAVE A YARD-IF SO, WRITE 'NO YARD'. CITY, STATE, AND ZIP ARE REQUIRED HERE AS WELL.</b> |                   |                      |                      |
| <b>GENERAL COMPANY E-MAIL:</b>   |                   |                      |                      |
| <b>GENERAL COMPANY FAX #:</b>  |                   |                      |                      |
| <b>COMPLETE COMPANY WEBSITE:</b>   |                   |                      |                      |
| <b>PLEASE INCLUDE THE IP ADDRESS AT THE BEGINNING.</b>   |                   |                      |                      |
| <b>LAGUNA CONTACT PERSON FOR COMPANY:</b>  | FIRST _____       | LAST _____           |                      |
| <b>LCS CONTACT PERSON DIRECT PHONE #:</b>  |                   |                      |                      |
| <b>LCS CONTACT PERSON E-MAIL:</b>  |                   |                      |                      |
| <b>INVOICE RECIPIENT NAME:</b>   | FIRST _____       | LAST _____           |                      |
| <b>INVOICE RECIPIENT E-MAIL:</b>   |                   |                      |                      |
| <b>INVOICE RECIPIENT FAX #:</b>  |                   |                      |                      |
| <b>INVOICE RECIPIENT MAILING ADDRESS:</b>  |                   |                      |                      |
| <b>COMMENTS OR EXPLANATIONS REGARDING INVOICE RECIPIENT INFORMATION:</b>   |                   |                      |                      |
| <b>HIGHLIGHT SALES TAX STATUS OF COMPANY:</b>  | NON<br>TAX EXEMPT | RESALE<br>TAX EXEMPT | DIRECT<br>TAX EXEMPT |
| <b>COMMENTS OR EXPLANATIONS REGARDING SALES TAX STATUS OF COMPANY:</b>   |                   |                      |                      |
| <b>CONTACT FOR PURCHASE ORDERS (P/O):</b>  | FIRST _____       | LAST _____           |                      |
| <b>TITLE OF CONTACT THAT DEALS WITH P/Os:</b>  |                   |                      |                      |
| <b>PHONE # OF P/O CONTACT:</b>   |                   |                      |                      |
| <b>P/O CONTACT E-MAIL:</b>   |                   |                      |                      |
| <b>A/P CONTACT NAME:</b>   | FIRST _____       | LAST _____           |                      |
| <b>A/P CONTACT TITLE:</b>  |                   |                      |                      |
| <b>A/P CONTACT DIRECT PHONE #:</b>   |                   |                      |                      |
| <b>A/P CONTACT E-MAIL:</b>   |                   |                      |                      |
| <b>COMMENTS OR EXPLANATIONS REGARDING A/P CONTACT PERSON INFORMATION:</b>  |                   |                      |                      |