LOUISIANA SECRETARY OF STATE
Commercial Division / UCC Section
P. O. Box 94125
Baton Rouge, LA 70804-9125

APPLICATION FOR DIRECT ACCESS COMPUTER SERVICE

Contact Name: _____

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: (_____) _____ Ext. _____

Facsimile: (_____) _____

E-mail Address: _____

(Additional passwords may be requested at any time.)

Total amount of check: $_____.

Please return application and check to above address

ATTENTION: Direct Access

Authorized Signature: _____

Please print name: _____

Date: _____

Terms of Agreement

Contractor gives no express or implied warranty as to the accuracy of the information to which Client is given direct access.

Client agrees that the information received via the dial-up direct access system is for the Client's internal use only and shall not be transferable, nor shall Client unilaterally propagate access to the system.

Contractor shall not be liable for unauthorized use or other misuse of Client's personal identification number or password,

Prices contained in this agreement are subject to change at the expiration of the agreement term. Client may renew the dial-up direct access with the Contractor by paying Contractor's billing subsequent to the expiration of this agreement.

By signing the above application form, Client agrees to all above stated terms and conditions.