

# THE INDIANAPOLIS STAR

**INDYSTAR.COM**

307 N. Pennsylvania Street, P.O. Box 145  
Indianapolis, IN 46206-0145

## STANDARD BUSINESS QUESTIONNAIRE

Date: \_\_\_\_\_

Account Number: \_\_\_\_\_

Company Name \_\_\_\_\_

Trade Style \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Bus Phone \_\_\_\_\_

CORPORATION	π
PARTNERSHIP	π
INDIVIDUAL	π
FRANCHISE	πYES πNO

Consent to Receive Faxes: Advertiser consents to receive facsimile advertisements from The Indianapolis Star to the following facsimile numbers: \_\_\_\_\_

If Co. is a Branch or Sub, list name & address of Parent co. \_\_\_\_\_

When Established \_\_\_\_\_ Nature of Business \_\_\_\_\_ # of Employees \_\_\_\_\_

Amount of Credit Requested \_\_\_\_\_ E-mail Address: \_\_\_\_\_

**IF BUSINESS ESTABLISHED LESS THAN 2 YRS. LIST PRINCIPALS' PREVIOUS BUSINESS CONNECTION BELOW**

NAMES OF OFFICERS, PARTNERS OR OWNERS	TITLE	HOME ADDRESS	HOME PHONE

Has Corporation been registered with the Secretary of State? \_\_\_\_\_ If so, what state \_\_\_\_\_ Date of Filing \_\_\_\_\_

Previous Account with *The Star* \_\_\_\_\_ Yes \_\_\_\_\_ No

If Yes, Name of Account and When \_\_\_\_\_

### CREDIT REFERENCES: Media/Trade

NAME	ADDRESS	CITY	STATE	ZIP	PHONE	ACCOUNT NUMBER

### BANK REFERENCES: C=Checking S = Savings M=Mortgage/Loan CPD=Charge Plate Deposits

NAME	ADDRESS	CITY	STATE	ZIP	PHONE	ACCOUNT NUMBER	TYPE

### ADVERTISING AGENCIES: PLEASE ATTACH COPY OF INSERTION ORDER

I certify that the information provided is true and correct. I hereby authorize the release of credit information requested by The Indianapolis Star relevant to the above account.

Signature of Officer or Principal \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

#### FOR OFFICE USE ONLY

Salesperson \_\_\_\_\_

Mgr/Supervisor \_\_\_\_\_

Ordered \_\_\_\_\_

App \_\_\_\_\_

Contract Size \_\_\_\_\_

DM-CM-CB-PER-BUS

Limit \_\_\_\_\_

Estimated Monthly Charges \$ \_\_\_\_\_

Remarks: