



PLEASE COMPLETE AND MAIL OR FAX TO:
ALOHA PRODUCE OF CENTRAL OREGON, INC.
20485 MURRAY ROAD
BEND, OR 97701

FAX # (541) 330-9178
PHONE # (541) 318-0300

APPLICANT'S NAME: _____

PHYSICAL ADDRESS: _____

BUSINESS TELEPHONE: _____ FAX #: _____ E-MAIL: _____

KITCHEN CONTACT NAME: _____

FOR ALL COD ORDERS - PAYMENT MUST BE MADE AT TIME OF DELIVERY OR ORDER WILL NOT BE LEFT. Accepted payment methods: cash, check or credit card. Any NSF check will result in a \$25 returned check fee and account will be placed on hold until balance is resolved.

CREDIT CARD INFO (IF PAYMENT CHOICE)
Credit card will be charged weekly with any balance

CREDIT CARD NUMBER: _____
EXP DATE : _____ CVC: _____
NAME ON CARD: _____
BILLING ADDRESS ZIP CODE: _____

DO YOU REQUIRE A PURCHASE ORDER GUIDE?

YES
NO

FOR ONLINE ORDERING/PRICELISTS:

USERNAME: _____

PASSWORD: _____

ANY SPECIAL DELIVERY INSTRUCTIONS/WHAT TIME WILL SOMEONE BE AT ESTABLISHMENT TO ACCEPT DELIVERY:

Owner Signature required on back Guarantee

ABSOLUTE UNLIMITED GUARANTEE

FOR VALUE RECEIVED, THE UNDERSIGNED JOINTLY AND SEVERALLY HEREBY ABSOLUTELY AND UNCONDITIONALLY GUARANTEE THE PERFORMANCE OF THE PAYMENT OF ALL SUMS OWING TO ALOHA FROM APPLICANT, AS PROVIDED ABOVE, INCLUDING BUT NOT LIMITED TO LATE CHARGES AND REASONABLE ATTORNEY'S FEES. THE LIABILITY OF THE UNDERSIGNED FOR PERFORMANCE OF APPLICANT'S AGREEMENT FOR PAYMENT OF ALL SUMS OF MONEY REFERRED TO IN THE APPLICANT'S AGREEMENT SHALL NOT BE AFFECTED BY: (1) ANY INDULGENCE, COMPROMISE, SETTLEMENT, EXTENSION, OR VARIATION OF THE TERMS GRANTED BY ALOHA TO APPLICANT; OR (2) BY SURRENDER, EXCHANGE, RELEASE, OR ALTERATION OF COLLATERAL HELD BY ALOHA OR ITS ASSIGNS FOR THE OBLIGATIONS HEREBY GUARANTEED, OR (3) BY ANY DISCHARGE OR RELEASE OF ANY OBLIGATIONS OF THE APPLICANT, OR ANY OTHER PERSON BY OPERATION OF LAW OR OTHERWISE. IT IS UNDERSTOOD AND AGREED THAT ALOHA WOULD NOT HAVE ENTERED INTO THE AGREEMENT WITH APPLICANT IF THE UNDERSIGNED GUARANTOR HAD NOT AGREED IN ADVANCE TO SIGN THIS GUARANTY, AND THAT THE APPLICANT AGREEMENT AND THIS GUARANTY WERE INTENDED AS A PART OF A SINGLE TRANSACTION. SHOULD THERE BE ANY DEFAULT ON THE APPLICANT AGREEMENT, ALOHA SHALL HAVE THE RIGHT TO PROCEED IMMEDIATELY AGAINST THE UNDERSIGNED GUARANTOR, WITHOUT ANY DEMAND OR NOTICE OF ANY KIND OR CHARACTER, AND WITHOUT FIRST PROCEEDING AGAINST APPLICANT OR ANY COLLATERAL. GUARANTOR AGREES THAT THE COURTS OF OREGON HAVE PERSONAL JURISDICTION OVER GUARANTOR AND SUBJECT MATTER JURISDICTION OVER THIS GUARANTY AGREEMENT AND IF THIS IS A GUARANTY OF A COMMERCIAL OBLIGATION, THAT PROPER VENUE IS IN DESCHUTES COUNTY, OREGON, OR AT THE OPTION OF ALOHA, ANY OTHER COURT THAT HAS PERSONAL AND SUBJECT MATTER JURISDICTION OVER THE APPLICANT OR GUARANTOR AND MATTER, RESPECTIVELY. THIS GUARANTY SHALL BE CONSIDERED TO HAVE BEEN MADE IN THE STATE OF OREGON AND SHALL BE INTERPRETED IN ACCORDANCE WITH THE LAWS OF THE STATE OF OREGON. GUARANTOR AGREES UPON DEMAND, TO PAY AND REIMBURSE TO ALOHA, ALL COST AND ATTORNEY'S FEES, AND WHERE APPLICABLE, ADMINISTRATIVE AND ARBITRATOR FEES AND EXPENCES WHICH ALOHA EXPENDS OR INCURS IN CONNECTION WITH THE COLLECTION OF ANY SUM GUARANTEED OR IN THE ENFORCEMENT OF THIS GUARANTY AGAINST GUARANTOR BOTH AT TRIAL AND ON APPEAL, INCLUDING ATTORNEY'S FEES AND COSTS INCURRED IN ANY BANKRUPTCY PROCEEDING.

SIGNATURE: _____ SIGNATURE: _____
SIGNATURE OF INDIVIDUAL, OWNER, CORPORATE OFFICER, OR PARTNER (SIGNATURE OF INDIVIDUAL, OWNER, CORPORATE OFFICER, OR PARTNER)

NAME: _____ NAME: _____
(PRINTED) (PRINTED)

TITLE: _____ TITLE: _____

HOME ADDRESS: _____ HOME ADDRESS: _____

SSN: _____ SSN: _____