

MODEL RECTIFIER CORPORATION

80 NEWFIELD AVENUE
EDISON, NEW JERSEY 08837-3817 USA

FAX: 732-225-0091
TEL: 732-225-2100

Dear Hobby Distributor:

First and foremost, We would like to thank you for choosing MRC. You will undoubtedly find that MRC products and services will meet your highest standards.

Our exclusive product lines available to distributors includes: ***MRC Model Railroad Products, JTT Scenery Products, Model Power and Mantua Railroad Products, Clever Paper, MRC Super Brain Chargers. Academy, Easy Model and Gallery plastic model kits.***

MRC has expanded significantly over the past few years in order to service hobby shops and distributors more efficiently with more quality hobby product lines.

- Our distributor pricing gives your business an advantage because every distributor has available the same price and terms. You can gain real profit with MRC pricing! We are your suppliers, **not your competitor.**
- **We back you with a powerful advertising campaign with non-stop advertising in leading publications and on the web. MRC creates the demand for the merchandise that brings the customers to your store.**
- Parts and dependable service are always available. Product literature and exploded views of our products are readily available upon request.

For your convenience, we have an 800 number only for ordering: **1-800-333-3692**. We also have a telephone number for billing information or technical advice: **732-225-6144**. This telephone number is the only one to be given to your customers.

If you have any questions please feel free to contact me. We are open from **8:30 AM to 6:00 PM Eastern Time.**

We look forward to doing business with you.

Sincerely,

Your MRC Marketing Representative

MODEL RECTIFIER CORPORATION

80 NEWFIELD AVENUE
EDISON, NEW JERSEY 08837-3817

FAX: 732-225-0091
TEL: 732-225-2100

HOBBY DISTRIBUTORS APPLICATION FORM

Company Name: _____

Business Phone: _____ Fax #: _____

Retail Tax #: _____ Years In Business _____

Address: _____

City: _____ State: _____ Zip: _____

Website Address: _____

E-Mail Address: _____

Type of Business: Single Proprietorship: Partnership: Corporation:

Business Hours: _____

Annual Sales Volume: _____ Number of Warehouses: ___ Original Owner: Y/ N

OWNERS

#1 Name: _____

Home Phone: _____ Home Address: _____

City: _____ State: _____ Zip Code: _____

Driver's License #: _____ Social Security #: _____

#2 Name: _____

Home Phone: _____ Home Address: _____

City: _____ State: _____ Zip Code: _____

Driver's License #: _____ Social Security #: _____

PLEASE CHECK ALL THAT APPLY:

ADVERTISING

- Radio
- Newspaper
- Newsletter
- Promo
- Website

CATEGORY BREAKDOWN

- R/C Cars: ___%
- Simulators: ___%
- Slot Cars: ___%
- R/C Planes: ___%
- R/C Boats: ___%
- R/C Heli: ___%
- Railroad: ___%
- Plastics: ___%
- Diecast: ___%

Total: 100%

PROMOTIONS

- Demonstration
- Classes
- Sponsored Events

At least three (3) credit references must be supplied along with their complete address and method of payment. If you do not have three credit references, please state this on the application:

PRESENTLY BUYING FROM THE FOLLOWING HOBBY SUPPLIERS:

1. Name: _____
Payment Method: C.O.D.: ___ Open: ___ C/C: ___ Account #: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax #: _____

2. Name: _____
Payment Method: C.O.D.: ___ Open: ___ C/C: ___ Account #: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax #: _____

3. Name: _____
Payment Method: C.O.D.: ___ Open: ___ C/C: ___ Account #: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax #: _____

4. Name: _____
Payment Method C.O.D.: ___ Open: ___ Account #: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax #: _____

5. Name: _____
Payment Method C.O.D.: ___ Open: ___ Account #: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax #: _____

6. Name: _____
Payment Method C.O.D.: ___ Open: ___ Account #: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax #: _____

At least three (3) selling references must be supplied along with their complete address. If you do not have three selling references, please state this on the application:

PRESENTLY SELLING TO THE FOLLOWING HOBBY DEALERS:

1. Hobby Shop Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: # _____

2. Hobby Shop Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax #: _____

3. Hobby Shop Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax #: _____

4. Hobby Shop Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax #: _____

5. Hobby Shop Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax #: _____

6. Hobby Shop Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax #: _____

MODEL RECTIFIER CORPORATION

80 NEWFIELD AVENUE
EDISON, NEW JERSEY 08837-3817

FAX: 732-225-0091
TEL: 732-225-2100

REQUEST FOR BANK CREDIT INFORMATION

TO: _____
(Name of Financial Institution)

Address: _____ City: _____ State: _____ Zip Code _____

Phone # _____ Fax #: _____

Please Provide Model Rectifier Corporation with the following information regarding:

Checking Account #: _____

This information is requested to use in the extension of credit for business purposes only. It will be held in the strictest of confidence.

I authorize the release of the information below to Model Rectifier Corporation:

Signature: _____
(Principal Officer or Owner)

(Business Name/ Corporation Name)

(Business Address and Phone Number)

TO BE COMPLETED BY BANK:

Date Account was opened: _____ Average Balance: _____

NSF? Yes / No (circle one) If yes, how many times in past 6 months? _____

Business / Personal Account (circle one)

Account Name: _____

Signers on Account: 1) _____ 2) _____

Comments: _____

(Signature)

(Title)

(Date)

MODEL RECTIFIER CORPORATION

80 NEWFIELD AVENUE
EDISON, NEW JERSEY 08837-3817

FAX: 732-225-0091
TEL: 732-225-2100

I hereby acknowledge that the above information is accurate and that any merchandise purchased from Model Rectifier Corporation will be for resale use only.

I understand that placing and order with Model Rectifier Corporation constitutes doing business in the state of New Jersey and is therefore subject to the laws of the State of New Jersey.

Should credit be granted by Model Rectifier Corporation, all decisions with respect to the extension or continuation shall be at the sole discretion of Model Rectifier Corporation. I understand that I may terminate my credit availability at my discretion at any time.

I agree to pay the net total before cash discount of any invoice that is not paid within terms. I acknowledge that if payment is not made within 30 days of invoice date that a finance charge may be added to my account. Any finance charge added will be determined by applying a 1.5% per month rate on the average monthly balance (18.0% Annual Percentage Rate) to the account.

I understand that it is my responsibility to give notification to Model Rectifier Corporation prior to any change in ownership, change of address or an intended date to cease operation.

In the event that the account becomes delinquent and is turned over to any collection agency or attorney for collection, I agree to pay collection fees and/or attorney fees not exceeding 30% of the past due balance plus court costs, serving costs and/or any miscellaneous expenses incurred as a result of my failure to pay.

I authorize Model Rectifier Corporation to make any credit inquires that it finds necessary in connection with this credit application or in the course of review or collection of any credit extended in reliance to this application. I authorize any credit reporting agency to compile and furnish any information that it my have to obtain a response to such credit inquiries and agree that such information along with this application shall remain the property of Model Rectifier Corporation whether or not credit is extended.

I hereby personally guarantee any indebtedness to Model Rectifier Corporation incurred by

(Business Name)

(Individual Guarantor/ Owner)

(Position)

(Date)

(Individual Guarantor/ Owner)

(Position)

(Date)

Forms must be filled out completely, signed and dated.

MODEL RECTIFIER CORPORATION

80 NEWFIELD AVENUE
EDISON, NEW JERSEY 08837-3817

FAX: 732-225-0091
TEL: 732-225-2100

US MAIL/ PARCEL POST CLAIMS RELEASE

DATE: _____

I understand and acknowledge that US Mail/ Parcel Post claims may take over a year to resolve and hereby release Model Rectifier Corporation from liability as this is not a guaranteed shipment method.

In the event I request a shipment via US Mail/ Parcel Post I will take full responsibility for payment to Model Rectifier Corporation even if the shipment is misdirected, lost or damaged in transit. I understand that my account will be adjusted as soon as the claim has been settled.

(Signature)

(Store Name)

(Store Address)

(City, State & Zip)