EXIM TRADE REFERENCE FORM

Note: Trade Experience Form should be signed and dated by the person taking the information and should be a person that is not from the foreign buyer or a company related to the foreign buyer.

Foreign I	buyer nar	ne & address							
Name and address of company giving reference:									
Name of person giving reference:									
Title:				Phone:					
Fax:				Email:					
Years of experience with buyer:									
Estimated annual sales to buyer (specify currency):									
Payment Terms:			Credit limit (s	specify current	cy):				
Highest a	amount ov	wed at one time that was paid	d in past 12 mo	onths (specify c	currency):				
Please d	escribe s	ecurity, if any, such as a stan	dby letter of cre	edit, personal g	uarantee or co	ollateral. If the	re is no security,	so state	е.
Date of last sale:									
Current outstanding balance (specify currency):									
Past due balance, if any (specify currency):					Number of days past due:				
Payme	nt Exp	erience:							
Prompt:		1-30 days slow:	31-60 days	slow:	61-90 day	s slow:	91+ days	slow:	
Comme	nts:								
Name of company taking reference:									
Name of person taking reference:									
Signature of person taking reference:									
Title:				Phone:					
Fax:				Email:					
Date:									

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NOTICES

The applicant is hereby notified that information requested by this form is done so under authority of the Export-Import Bank Act of 1945, as amended (12 USC 635 et. seq.); provision of this information is mandatory and failure to provide the requested information may result in EXIM being unable to determine eligibility for support. EXIM may not require the information and applicants are not required to provide information requested in this application unless a currently valid OMB control number is displayed on this form (see upper right of each page).

Paperwork Reduction Act Statement: We estimate that it will take you about 15 minutes to complete this form. This includes the time it will take to read the instructions, gather the necessary facts and fill out the form. However, you are not required to provide information requested unless a valid OMB control number is displayed on the form. If you have comments or suggestions regarding the above estimate or ways to simplify this form, forward correspondence to EXIM and the Office of Management and Budget, Paperwork Reduction Project OMB # 3048-0042; Washington, D.C. 20503.

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