|  |
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| **Exhibit C: Credit Information** |

1. Please list three businesses that submit regular invoices to your accounting department. SJI may contact these vendors if your proposal is selected to participate in the negotiation process.

|  |  |  |  |
| --- | --- | --- | --- |
| **Company Name** | **Company Address** | **Contact Person** | **Contact Phone Number** |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |

1. SJI will not contact your bank unless your organization is selected to participate in the negotiation process. At that time we may contact your bank to confirm your account number, your daily average balance, and your overdraft and NSF history.

|  |  |
| --- | --- |
| Name of bank: |       |
| Account number: |       |
| Name of banking representative who handles your account: |       |
| On behalf of |       |
|  | Name of organization |
| I authorize Seattle Jobs Initiative to contact the above-mentioned organizations. |
|       |
| Printed name |
|  |
| Signature |