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Initials: WJ (REQUIRED)

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REQUIRED: The Client hereby confirms it has read and understands the aforementioned terms of service

Initials WB

REQUIRED: Client Information:

Company Legal Name: AMERICAN INSULATED GLASS, LLC

State of Incorporation: DE

Company Mailing Address (no P.O. Boxes) - must match address given on Page 1:

3965 E Conroy Rd
Conroy GA 30258

REQUIRED: Client Primary Contact and Authorized Sender:

First Name: Chris Last Name: Beason

Job Title: GM Phone Number: 404 361 9154

Email Address (must match the URL of company's domain name): cbca@agbuss.com Cell Phone: 478 606 1028

Initials: WB (REQUIRED)

Additional Authorized Senders

First Name: _____ Last Name: _____
Job Title: _____ Phone Number: _____
Email Address: _____ Cell Phone: _____

First Name: _____ Last Name: _____
Job Title: _____ Phone Number: _____
Email Address: _____ Cell Phone: _____

First Name: _____ Last Name: _____
Job Title: _____ Phone Number: _____
Email Address: _____ Cell Phone: _____

First Name: _____ Last Name: _____
Job Title: _____ Phone Number: _____
Email Address: _____ Cell Phone: _____

REQUIRED: The Client hereby authorizes these parties to issue press releases for distribution on its behalf.

Initials _____

REQUIRED: The Client hereby agrees to all terms and conditions included in the Agreement.

Primary Authorized Sender Signature: _____

Print Name: _____

Position/Title: _____

Date: _____

Initials: _____ **(REQUIRED)**