

Candidate Information Sheet

PEPPERIDGE FARM, INCORPORATED

I. GENERAL INFORMATION

Date: _____

Legal Name: _____ Social Security #: _____

Corporation/LLC Name (If applicable) _____ Federal Tax ID #: _____

Spouse's Name: _____ Social Security #: _____

Do you live within the territory? _____ Home Address: _____
 City: _____ State: _____ Zip Code: _____

Cell Phone #: _____ Home Phone #: _____

Length of Time at Present Address: _____

Length of Time at Previous Address: _____ Previous Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

Date of Birth: _____ Marital Status: Single: _____ Married: _____ # of Children: _____
 (Living with you)

II. EDUCATION

	Name of School, City and State	Program	Degree Received
High School			
College			
Business/Trade or Technical School			
Other			

III. PERSONAL DATA

Driver's License #: _____

Have you been involved in any traffic accidents during the past five years? Yes _____ No _____
 If "yes" please describe: _____

Have you been convicted of any motor vehicle traffic violations within the past five years? Yes _____ No _____
 If "yes" what were the reasons: _____

Have you ever had your driver's license suspended or revoked? Yes _____ No _____
 If "yes" what were the reasons: _____

Have you ever been convicted of or pled "guilty" or "no contest" to any criminal offense other than motor vehicle or traffic violations?
 No _____ Yes If "yes" please describe: _____

IV. WORK HISTORY

Present Business or Employer _____
 Street Address: _____
 City, State, Zip Code: _____

Type of Business or Work Performed: _____
 Start Date: _____ End Date: _____ Starting Salary: _____ Ending Salary: _____
 Expected date of departure from current employment: _____

Previous Business or Employer _____
 Street Address: _____
 City, State, Zip Code: _____

Type of Business or Work Performed: _____
 Start Date: _____ End Date: _____ Starting Salary: _____ Ending Salary: _____
 Reason For Change: _____

V. FINANCIAL HISTORY

Name and address of your bank _____

Who holds your mortgage? _____

Original amount of your mortgage \$ _____

VI. ASSETS and LIABILITIES

Attach 3 most recent months of each bank/brokerage statements in support of all assets to be used for down payment or full purchase with Candidate's name & address clearly noted on statements. Provide supporting documentation for all monthly income.

A. Cash (List any assets that are in your name or spouse's)

Checking Account \$ _____
 Savings Account \$ _____
 Certificates of Deposit \$ _____
 IRA/Keogh \$ _____
 Stocks & Bonds \$ _____
 Other Securities \$ _____

 Subtotal \$ _____

B. PERSONAL PROPERTY (List Fair Market Value)

Home (residence) \$ _____
 Rental Property \$ _____
 Land \$ _____
 Vehicles \$ _____
 Boats & Trailers \$ _____
 Other (Itemize) _____

 Subtotal \$ _____

C. LIABILITIES (Show what remains to be paid)

Mortgage-Residence \$ _____
 Mortgage-Rental Property \$ _____
 2nd Mortgage (Home Equity) \$ _____
 Mortgage-Land \$ _____
 Loan-Vehicles \$ _____
 Loan-Boat & Trailer \$ _____
 Charge Account \$ _____
 Personal Loan \$ _____
 Judgments \$ _____
 Liens \$ _____
 Other Debt (Itemize) \$ _____
 Subtotal \$ _____

VII. INCOME

Spouse's Monthly Net Income \$ _____ *(Provide 4 pay stubs)
 Monthly Rental Income \$ _____
 Monthly Interest Income \$ _____
 Monthly Dividend Income \$ _____
 Monthly Alimony Income \$ _____
 Monthly Child Support Income \$ _____
 Other Income (explain) \$ _____
 Subtotal \$ _____

If any expense is not applicable, mark NA on the line

VIII. EXPENSES (Both Spouses)

Monthly Mortgage Payment \$ _____ (Include Taxes/Ins)
 Monthly Mortgage-Land \$ _____
 Live at home w/other _____ (signed letter supporting no rental payment)
 Monthly Rent \$ _____ (copy of rental agreement)
 Monthly Home Equity Payment \$ _____
 Monthly Tuition Costs/Student Loans \$ _____
 Monthly Loan - Vehicle(s) \$ _____
 Monthly Loan - Personal \$ _____
 Monthly Loan - Boat/Trailer \$ _____
 Monthly Condominium Assessments \$ _____
 Monthly Alimony/Child Support \$ _____
 Monthly Food Bill \$ _____
 Monthly Clothing Expenses \$ _____
 Monthly Utilities \$ _____ *Electric*
 \$ _____ *Telephone/Cell*
 \$ _____ *Heating*
 \$ _____ *Cable TV*
 \$ _____ *Water*
 Monthly Transportation Costs Personal \$ _____ *Gasoline*
 \$ _____ *Car Maintenance*
 \$ _____ *Auto Insurance*
 Monthly Health Care Costs \$ _____ (*Dental, Medical, Health Ins*)
 Monthly Life Insurance Costs \$ _____
 Monthly Credit Card Payments \$ _____
 Monthly Entertainment Costs \$ _____ (movies, hobbies, sports, etc)
 Other Expenses (explain) \$ _____
 Monthly Payment of Existing BOA Loan \$ _____ (*PF Distributor Route Loan*)
Total Living Expenses \$ _____

Net Worth	
Cash & Personal Property Assets \$ (A&B)	
Liabilities \$ (Part C) _____	
Net Worth \$ _____	

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I do not know of past or present illness, physical disability, or condition which would prevent me from using my best efforts to realize the full sales potential for Pepperidge Farm products in any distribution territory in which which I might be approved as a Sales Development Associate (SDA).

Otherwise, explain in detail: _____

I understand that I cannot purchase a Pepperidge Farm Distributorship unless I have been approved by Pepperidge Farm as a candidate and unless I enter into a Consignment Agreement with Pepperidge Farm concurrently with acquiring the Distributorship. By signing this document, I acknowledge and certify that all information provided in this Candidate Information Sheet is true and accurate and that the concealment or falsification of any information requested or provided in the Candidate Information Sheet will be grounds for rejecting my application, revoking any approval previously given and/or terminating any Consignment Agreement entered into with me. I hereby authorize Pepperidge Farm, from time to time and at such times as it deems appropriate, to obtain and review, from any State Agency or other source from which they may be available, my individual driving records and those of any person(s) whom I engage to operate any portion of my Distributorship.

NEITHER PEPPERIDGE FARM, INCORPORATED NOR ANY OF ITS EMPLOYEES OR REPRESENTATIVES MAKES ANY REPRESENTATIONS OR GUARANTEES WITH RESPECT TO THE SALES OR OTHER INFORMATION CONTAINED HEREIN, INCLUDING WITHOUT LIMITATION THE FAIR MARKET VALUE OF ANY EXISTING PEPPERIDGE FARM DISTRIBUTORSHIP OR WITH RESPECT TO THE TAX, FINANCIAL, OPERATIONAL OR LEGAL OUTCOMES OF ANY TRANSACTIONS OR ARRANGEMENTS TO ACQUIRE ANY SUCH DISTRIBUTORSHIP FROM ANY CURRENT PEPPERIDGE FARM DISTRIBUTOR. ANY INVESTMENT IN SUCH DISTRIBUTION RIGHTS INVOLVES POTENTIAL RISK. EACH PROSPECTIVE PURCHASER SHOULD CONSULT WITH HIS, HER OR ITS OWN ADVISORS AS TO LEGAL, TAX, BUSINESS, FINANCIAL AND RELATED ASPECTS OF THE PURCHASE OF SUCH DISTRIBUTION RIGHTS. PAST PERFORMANCE IS NO GUARANTEE OF FUTURE RETURNS.

(Written Signature of Candidate)

(Date)

(Print Signature of Candidate)

Notice: As part of Pepperidge Farm's routine processing of an information sheet for a prospective SDA, an investigation and report are sometimes obtained from a consumer reporting agency concerning the candidate's character, general reputation, driving record and credit history. If such an investigation and report are obtained in your case, Pepperidge Farm will, upon your written request, provide you with additional information as to the nature and scope of the investigation.

PERMISSION TO REVIEW SPOUSAL CREDIT REPORT

I, _____, spouse of
(first name) *(last name)*

SDA Candidate _____ give Pepperidge Farm, Incorporated
permission to review my credit report.

Date of Birth: _____ Social Security #: _____

My current address: _____

My previous address: _____

(Spouse Signature)

(Date)