

# WEINER DISTRIBUTING

1201 Desoto Rd Baltimore, MD 21223  
Phone: 410-525-2600 Fax: 410-646-1760  
www.WeinerD.com

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## Credit Card Authorization Form

Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Purchase Number: \_\_\_\_\_

### Credit Card Authorization

Credit Card: Visa \_\_\_\_\_ MasterCard \_\_\_\_\_

Card Type: Personal \_\_\_\_\_ Corporate \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration: \_\_\_\_\_

### Card Holder's Billing Address (if different from above)

Address: \_\_\_\_\_

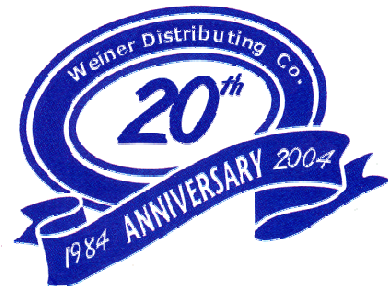
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Card Holder's Name (Please Print) \_\_\_\_\_

### Agreement

***"I personally guarantee that this information is true and correct. Before I can earn a credit account with Weiner Distributing Company, I agree to pay in full, for all merchandise with the above credit card information."***

\_\_\_\_\_  
Card Holder's Signature



Please fax this form back to us at 410-646-1760