

To Whom It May Concern:

In able for us to charge your credit card for either merchandise picked-up or delivered to your establishment, it is imperative that the attached **CREDIT CARD AUTHORIZATION FORM** be filled out and returned to us at your earliest convenience. Please insure you also include a copy of the front and back of your credit card

Respectfully,

Woolco Foods, Inc.
Credit Department

CREDIT CARD AUTHORIZATION FORM

I _____, the owner of _____,
(Owner's Name) *(Name of Establishment)*

located at _____, hereby authorize Woolco
(Address of Establishment)

Foods, Inc. to charge my credit card for any order(s) my establishment places for either pick-up or delivery.

PLEASE FILL OUT INFORMATION BELOW

CARD TYPE: _____

CARD NUMBER: _____

EXPIRATION DATE: _____

CV CODE _____ (Amex is the 4 digits above card # on right)

COMPLETE BILLING ADDRESS: _____

SIGNATURE OF CARDHOLDER: _____

PRINT NAME: _____

For verification purposes, please submit photocopy of the above credit card to be authorized.

Thank you,

Woolco Foods, Inc.
Credit Department