

## <u>CREDIT / NEW ACCOUNT APPLICATION</u> \* MARK = REQUIRED INFORMATION \*

Submitted by: Frank Trebon	Date:	ISR#: 3695 A	ccount	# if known	
Account Name:*					
Contact Name: * Person Respor	nsible for payment of Invoice	e			
Address*					
City:*	State:*		Zip:*		
Day Phone #:*	Cell Phone #:*_		Fax #	!·*	
E-Mail Address:*	FAX <b>MD T</b>	FAX MD TAX EXEMPT CERTIFICATE TO: 410-561-5100			
OPTION #1:	COMPLETE THIS AREA ONLY IF	APPLYING FOR C	PEN CR	<u>EDIT</u>	
The undersigned, whether as an office of the corporation or as an individual, authorizes World's Finest					
Chocolate, Inc to draw a personal consumer credit report to assist us in evaluating credit worthiness.					
*Signature:	*Date: :	Social Security Number:			
	COMPLETE THIS AREA ONLY I				
*Name on credit card:	Card #:*				
Expiration Date*: Security Code*	f: Signature:*				
Privacy Policy: We restrict access to non-pu maintain physical, electronic, and procedur	•	• •			
OPTION #3: SIGN HERE IF YOU ARE PAYING BY MONEY ORDER AT THE WAREHOUSE:					
*Signature:	FAX VA TA	X EXEMPT CERT	ΓΙ <b>FICAT</b>	E TO: 757-467-3659	
PRODUCT/PRODUCTS TO SELL: *		NUMBER OF (	CASES:*		
DATE DESIRED:					
TAX EXEMPT: YES NO If YES, 7	THEN YOU MUST FAX US THE TAX EXE	MPT CERTIFICATE TO	757-467-3	3659 IN ADVANCE OF Delivery.	
FOR INTERNAL USE ONLY:					
ISR Name:	<u>Frank Trebon</u>	IC	)#: <u>3695</u>		
Reviewed by:		Approval: Yes	0 1	No 🔾	
Authorized by:		Terms: CIA/C	OD O	cc O	
Account Number:		NT30	O D	ep Req 🔘	

FAX CREDIT APPLICATION TO: 757-467-3659 OR E-MAIL APPLICATION TO: <a href="mailto:ftrebon@winningedge4you.com">ftrebon@winningedge4you.com</a> PHONE: 757-467-8874