



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

Co. Address: \_\_\_\_\_

Co. Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Dear Customer,

As required by your bank, authorization must be given by authorized personnel at your organization to release any type of credit or account information.

To assist us in expediting your credit reference, please sign on the line below; provide us with your financial institution's contact information and the account number. Please fax this completed form to Puritan Products, Inc. **Attn: Debi Kohler at fax number (610) 866.4270**. This will serve as your authorization for your financial institution to release information needed to expedite your order.

Authorized by (Print name): \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

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

Account Number: \_\_\_\_\_

Financial Institution: \_\_\_\_\_

Financial Institution Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Thank you for your assistance,

Jan Yellets  
Credit & Collections Manager  
Puritan Products, Inc.  
2290 Avenue A  
Bethlehem, PA 18017  
F: 610.866.4270  
jyellets@puritanproducts.com

