



DATE _____

Account Number _____

Dear _____:

Thank you for the opportunity to serve you! According to our records, you have requested to pay for your deliveries with your Visa, MasterCard, or Discover card.

Our policy for using your credit card is as follows: Your payment will be deducted on the same day as your delivery. If it is being used for Budget payments, it will be deducted on the 15th of the month.

If you have any questions regarding our policy, or if you need to discuss special circumstances regarding the use of your credit card, don't hesitate to contact our office. Please complete, detach and return the bottom portion of this letter in the enclosed envelope.

Penn-Mar Oil Co., Inc.

I authorize Penn-Mar Oil Co., Inc. to automatically debit my credit card (listed below) for all deliveries.

Signed _____
(must be signed by person whose name appears on card)

Name (person's name as it appears on card) _____

Card Number _____

Expiration Date _____

122 Madison Avenue
Waynesboro, PA 17268
717/ 762-3811
800/ 669-0539
717/ 762-3664 FAX