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Canby, Oregon 97013
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WHOLESALE ACCOUNT APPLICATION

Business Name: _____

Owner/Contact: _____

Address: _____

Business Phone: _____ **Fax:** _____

Email: _____

Website Address: _____

Primary Resale Environment: Brick and Mortar Storefront

Website/E-Commerce Trade Shows/Events Other: _____

Tax ID#/Resale#/State License Number: _____

(photocopy of supporting documents for your number are required)

Your first four orders must be prepaid through a credit card:

Credit Card# (Visa, MC, or Amex)

Exp: _____

How Did You Hear About Wedding Belle Favors? _____

Thank you for your interest in Wedding Belle Favors!

Please fax or send this application with supporting documents.

Please Initial:

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