



“Welcome to Wilmacards . . . as **unique** as you are!”

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RETAILERS' INFORMATION:

Please submit the following information and **MAIL TO:** Wilmacards, Inc. at the above address.

Resale License Number: (Federal Tax ID):

Type of Store:

Number of years in business:

How did you hear about us?

Please attach a list of **TRADE REFERENCES** if available. Thank You!
 (All information below is required for Net 30 terms.)

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