



WINKLER CONSUMERS CO-OPERATIVE LTD.
 Box 1120 Winkler, Manitoba R6W 482
 Phone: 204-325-9595

Application for credit

Name _____	Member# _____
Address _____	SIN _____
_____	Home Phone _____
_____	Business Phone _____
How long at above address _____	Driver's License _____
Previous Address _____	How long _____
Age _____ Marital Status _____	No. of dependents _____
Occupation _____	Salary _____
Employer's Name _____	Length of Employment _____
Employer's Address _____	Employer's Phone# _____
Spouse's Name _____	Salary _____
Spouse's Employer _____	Employer's Phone # _____
Spouse's Employer Address _____	Length of Employment _____
Board Amount _____	Rent Amount _____
Home Financed By _____	Monthly Payment _____
Name of Nearest Non-Dependent Relative _____	
Address of Above _____	Relationship _____
Credit Card # _____	
Name & Branch of Financial Institution _____	

Credit References (provide name, address & phone#)

- 1 _____
- 2 _____
- 3 _____

Amount of Credit Required _____	Which Department to Charge _____
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I understand that purchases made during a calendar month on a charge account are payable in full by the last day of the following month. An interest charge of 2% per month will be charged on an account that is past due.

Please use this as your authority to do whatever credit check is necessary to process my application for credit.

Date _____	Signature _____
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OFFICE USE ONLY

APPROVED

DECLINED