Western Refining

BANK REFERENCE AUTHORIZATION FORM

We are in the process of updating our credit files and are in need of your current bank reference. Please complete this form and return it to the below address attention Credit Department.

BANK REFERENCE

Name _____

Street Address _____

City / State / Zip _____

Telephone ( ) ( ) ( ) Fax ( ) ( ) ( )

Contact Person _____

Checking Account #:

Deposit Account #:

Loan Acct #:

INFORMATION RELEASE

Permission is hereby granted to the establishment listed above to release the requested information to Western Refining.

_____ _____

COMPANY NAME **ADDRESS**

_____ _____

AUTHORIZED NAME (PLEASE PRINT) **AUTHORIZED SIGNATURE**

_____

DATE