



**DENNIS K. BURKE INC.**

**EFT WIRE TRANSFER INFORMATION FORM**

**Date:** \_\_\_\_\_

**Company Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Contact Name** \_\_\_\_\_

**(Please include email address and/or fax number of contact(s) to receive EFT prenotes and invoices)**

**Telephone#** \_\_\_\_\_ **Fax#** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Bank Name:** \_\_\_\_\_

**Bank Address:** \_\_\_\_\_

**ABA#** \_\_\_\_\_

**Account#** \_\_\_\_\_

**Beneficiary Name** \_\_\_\_\_

**Please Sign Here** \_\_\_\_\_

Invoice amount will be debited out of your account 15 days from invoice date

**You will receive notification of debit amount prior to transaction date**

***Premium Diesel Fuel, Motor Oil and Gasoline***

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