## **Purchase Recent Issues of Restaurant Operations Weekly Newsletter**



Please complete this form and send it back via fax or e-mail and upon receipt, we will send you PDF copies of your requested issues via e-mail within 24 hours.

**Restaurant Operations Weekly, Inc.** 

2833 S. Colorado Blvd. Denver, Colorado. 80222 E-mail: kevin@restaurantconsultingservices.com

Fax: 303-691-0555 Phone: 720-363-0164

## **CREDIT CARD AUTHORIZATION FORM - CARDHOLDER INFORMATION**

Name:		
Billing Street Address:		
City:	State:	Zip Code:
Email:		Telephone: ()
AUTHORIZATION		
I wish to purchase copies of the "Resta	aurant Opera	tions Weekly™ Newsletter using my credit card.
\$69.95 for the 10 most recent issues.	I authorize th	nis one-time charge. X
\$129.95 for the 20 most recent issues	(Save \$10). I	authorize this one-time charge. X
Send them to this e-mail address:		
CREDIT CARD INFORMATION		
Credit Card Type: MasterCard V	isa Ame	erican Express Discover Card
Name on Card:		
Card Number:		
Security Code: (Three digit code on ba	ck of card, fo	ur digits for American Express Cards)
Expiration Month:Expir	ration Year: _	
Cardholder Signature X		Date/

Thank you for your purchase. A fax copy will be treated as an original document. If you have any questions about this form, or need assistance, please call our main office number at 720-363-0164.