



**Indie Home Delivery Promotion Credit Request Form**

Account Name: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Account Address: \_\_\_\_\_

HBG Account Number: \_\_\_\_\_

Account Phone: \_\_\_\_\_

Contact Name: \_\_\_\_\_

ISBN	Title	Price	Delivery Date(s)	Quantity Delivered

Credit Due = 5% of retail price \_\_\_\_\_

Signed: \_\_\_\_\_

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

**Email form to: [telephonesales@hbgusa.com](mailto:telephonesales@hbgusa.com)**