



Wood Floors
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AUTHORIZATION TO CREATE A CHECK DRAFT

Date _____

From (Company Name) _____

Bank Account name _____

Bank Account number _____

Routing number _____

Re: Invoice(s) # _____

IN THE AMOUNT OF _____

THIS AUTHORIZATION IS VALID FOR THIS TRANSACTION ONLY

_____	_____	_____
Signature	Title	Date

FILL OUT THE CHECK AND SIGN IT.

PLACE YOUR CHECK HERE AND FAX

***** COMPANY CHECKS ONLY *****

PLEASE DO NOT MAIL THE ORIGINAL CHECK

****Please verify with your bank availability of funds at the time of faxing.*

Bounced check fee is \$25 and could result in your COD status being revoked.