

DATE:				
ACCOUNT NUME	BER:			
ACCOUNT NAME	Ξ:			
ACH	I SINGLE TRAN	SACTION AUTH	HORIZATION F	ORM
ayment of the full amount due on the second as valided debit activities gainst the account that I have p	od to initiate an ACHdraft to my a on invoice(s) or orders indicated under my account. I also agree provided in this authorization and ess from any and all losses or liab	on this authorization form. I furt that I will immediately reimburse agree to pay a (\$35) dollar char	her authorize the Financial Instue Muchsee Wood, Inc for any dis rge if this ACH is dishonored for	ution to accept these debit shonored ACH transactions rany reason. I agree to
	BANK INF	FORMATION		
NAME ON ACC	COUNT			
BANK ROUTIN	IG NUMBER			
BANK ACCOU	NT NUMBER			
CHECKING	SAVINGS	S		
PLEASE PROVIDE PA	YMENT APPLICATION IN	IFORMATION:		
ORDER # OR INVOICE#	INVOICE DATE	GROSS INVOICE AMT	DISCOUNT OR DEDUCTION TAKEN WITH EXPLANATION	NET INVOICE/ ORDER AMOUNT
	ACH TOTAL			
SIGNATURE	DATE			
FAX:706-659-4227	EMAIL: wynette@crea	ateflooring com	••••••••	••••••

credit@createflooring.com

Attn: A/P