

Check Authorization

Ι,	, authorize "C3 Surfaces" to use my check #
I,, authorize "C3 Surfaces" to use my check #, in the amount of \$ This draft will be debited automatically from my account. I understand that I presently have these funds available in my account to process this draft. This is to be done on a one time only basis. This draft authorization is solely for the purpose of securing coverage for Sales Order #	
Printed Name	Drivers License # & State
Signature	Date
written on the top left corner of th	"C3 Surfaces", with Valid Drivers License number and State ne check. X, PLEASE SEND ORIGINAL CHECK TO:
	C3 Surfaces 1959 W Northwest Hwy Dallas, TX 75220
Thank you	
Please complete the information	on below:
Billing Address	Phone#
City, State, Zip	Email
Shipping Address	Phone#
City State 7in	Fay #

C3 Surfaces.