

CREDIT CARD AUTHORIZATION FORM

Use this form to transmit credit card info or call us with this information—see notes below on what we do with this information —

Customer Name		Company Name		
Email Address		Phone Number		
Product Being Purchased:				
Our Sales Order #	Your PO #	Special Instructions		
Copy attached Copy attached				
Total Amount to be Charged	Name of Person Authorizing	g this Charge	Signature	
PAYMENT METHOD				
Use my credit card on file VISA Master Card Discover American Express Enter last 4 digits of card				
Use a new credit card Card Number Internal: AFTER RECORDING CRE		scover American Exp.	kpress CVC	3-4 digits on back of card
First Name (as listed on card)		Last Name (as listed on card)		
Address				
City	State	/Province Zip/	Postal Code	Country
Phone				
Authorize. Net Whate the world does business on the Web your cr	our safety, we will be saving your creedit card number from this form and results of your credit card. Learn more c	destroy it. Then the or		

Please note: The billing entity that will show up for CorksribasUSA (as one of its d/b/a's) on your credit card statement will be:

TW FLOORING GROUP

115-C Twinbridge Drive, Pennsauken, NJ 08110

1.609.589.3100 • Learn More **TWFlooringGroup.com**

Return this form to:

CorksribasUSA.com

1.609.438.1400 • info@CorksribasUSA.com