

E-Check Authorization Form

Date:	
I, , au	thorize Furniture Leisure, Inc. to charge my banking
Customer Name	
account listed below on	for the amount of \$ for for
Date	Payment Amount
Description of Transaction	on .
My account information is as follows:	
Customer Name (as it appears on Bank Account	·):
Bank Name:	
Account Type: Checking Savings	Business Checking
Bank ABA Routing Number:	
Bank Account Number:	
This payment authorization is valid and to remain	n in effect unless I,
notify Furniture Leisure, Inc. of its cancellation b	
Bunnell, FL 32110), or email (sales@furnitureleisu	re.com).
Customer Name Printed	
Customer Signature	



www.FurnitureLeisure.com



2729 East Moody Blvd Suite #203, Bunnell FL, 32110



% 1-800-213-2401

386-437-6652

Our Brands:

FurnitureLeisure.com PoolFurnitureSupply.com PicnicFurniture.com

ParkTables.com PicnicTableSupplier.com

uBrace.com