



RADFLO Suspension Technology
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CREDIT CARD AUTHORIZATION FORM /WIRING INSTRUCTIONS

Today's Date: _____

Name on Credit Card: _____

Name on Order: _____

Bank Name (If wiring): _____

Card Type/Bank Routing number(Amex not available)

Credit Card
Number _____

Expiration Date _____

CVV Number on the back (3 digits) _____

Authorized signature of card holder _____

Description of what is being paid for: _____

Complete Billing Address(Must be non PO Box, Address must be in the US physical mailing address.)

Complete Shipping Address (If same as above please indicate 'same', include name to be shipped 'to'.)

Total Amount To Be Charged: _____

***Please include a copy of your Drivers License front and back, and a Copy of your credit card front and back
Fax sheet included**

*Exclusions apply, please revert to payment terms and condition on www.radflo.com for alternative inquiries
please email customer service direct at info@radflo.com.

Thank you

Customer Service Processing Team