

Please fill in the way that you prefer to receive the following correspondence from Tri-State Flooring. Should you need space for additional names, feel free to use the back of this page or attach another document. If we have correspondence information currently on file, this information will supersede (or replace) past information. You can choose from either email or Fax versions of each. Please type or print clearly.

Store Information

Store Name _____ Main Phone _____ Fax _____

Billing Address _____ City _____ State _____ Zip _____

Shipping Address _____ City _____ State _____ Zip _____

Store Contacts

Name (First, Last) _____ Title _____

Office Phone _____ Mobile Phone _____

Email Address _____

Invoices/Statements Newsletters/Pricesheets Order Acknowledgments

Store Contacts

Name (First, Last) _____ Title _____

Office Phone _____ Mobile Phone _____

Email Address _____

Invoices/Statements Newsletters/Pricesheets Order Acknowledgments

Store Contacts

Name (First, Last) _____ Title _____

Office Phone _____ Mobile Phone _____

Email Address _____

Invoices/Statements Newsletters/Pricesheets Order Acknowledgments

Special Instructions _____

Signature _____ **Date** _____