

CREDIT CARD SALE AUTHORIZATION FORM

Fax to: 919-217-8643

Price's Auto Parts, LLC.
1900 Old Crews Road
Knightdale, NC 27545
919-266-0171 800-672-9211

Date: _____

Transaction Reference#: _____

Description of Purchase#: _____

CARD INFORMATION

Check One Visa Master Card Discover

LAST 4 DIGITS OF ACCOUNT NUMBER: _____

EXPIRATION DATE: _____ **SECURITY CODE:** _____

Name as it appears on Card: _____

Card Holders Address: _____

ZIP CODE: _____

Card Holders Home Phone#: _____

Card Holders Work Phone#: _____

I/WE AUTHORIZE Price's Auto Parts, LLC. Knightdale, NC. TO CHARGE MY CREDIT CARD IN THE AMOUNT OF: \$ _____

Third Party Pickup Authorization:

I/WE AUTHORIZE Price's Auto Parts to deliver our purchase and/or

I/WE AUTHORIZE _____

TO PICKUP THIS PURCHASE ON OUR BEHALF from Price's Auto Parts

CARD HOLDERS SIGNATURE: _____