



Phone Order Credit Card Authorization



Company/Individual Name: _____

Phone #: _____ Vehicle VIN #: _____

Street Address: (Should not be a PO Box)

Ship to Address (if different):

Street:		Street:	
City:	State:	City:	State:
Zip:		Zip:	

Full Name on Card: _____

Full Card Number: _____ - _____ - _____ - _____

Exp. Date: ____/____ V Code: _____

I _____ (Print Name) am authorized to make purchases with the card I have listed above. I would like to authorize the purchases from Central Auto Parts on invoice/work order # _____ for the amount of \$ _____.

I further authorize Central Auto Parts to charge this card for additional fees or charges that are imposed by 3rd party freight/shipping carriers associated with **undisclosed** residential delivery or lift gate service.

Card Holder Signature

_____/_____/_____
Date Signed

Front and back card copies are required on all manually entered transactions over \$500.

Front of Card Copy	Rear of Card Copy
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