

Credit Card Authorization Agreement

Amount To Be Charged	
Amount	
	Credit Card Information
Cardholder Name	
Card Number	
Experation Date	
CVV (3 digit number)	
Circle One	VISA DISCOVER DEBIT
	Credit Card Billing Information
Billing Address	
Billing City, State & Zip Code	
Phone Number	
	Shipping Information
Shipping Address	
Shipping City, State & Zip Code	
Lauthorize Orozco Auto Parts II	C to charge my credit card listed above for goods purchased listed on my

I authorize Orozco Auto Parts, LLC to charge my credit card listed above for goods purchased listed on my invoice. I agree that if additional shipping charges are incurred I authorize for those additional charges to be charged on my credit card. I agree not to dispute any charges against Orozco Auto Parts, LLC.

Customer Print Name	
Customer Signature	
Date	

^{*}Email picture of credit card front and back along with a matching picture ID*