

General Auto Parts, LLC

Indoor used parts superstore

Fax Back To: 815 986-0772

Credit Card Authorization



Bill To

PRINTED NAME OF CARDHOLDER (*purchaser*): _____

NAME OF COMPANY: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE#: _____ FAX#: _____

EMAIL: _____ for package tracking.

Ship To

Same as Above NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE#: _____

****Required** To ensure order accuracy please tell us about the vehicle you are purchasing these parts for **Required****

PO#:

Vehicle Year:

Model:

Parts Purchased:

Credit Cards Accepted: VISA MASTERCARD DISCOVER

Credit Card Number: _____

Expiration Date: _____

Verification Code (3 digit #): _____

Driver's Lic. #: _____

Today's Date: _____ Charge Amount \$ _____ (*applicable sales tax, core fee and shipping may be added.*)

Cardholder (*purchaser*) _____ Authorizes General Auto Parts, LLC

Signature

to charge my credit card as indicated above and hereby agree to the following terms and conditions, The person signing this document warrants and represents that he/she is fully authorized to enter into this agreement, If General Auto Parts, LLC is required to retain an attorney, the above purchaser agrees to pay reasonable attorney's fees and all expenses incurred by General Auto Parts, LLC, All disputes with General Auto Parts, LLC will be subject to jurisdiction and resolution in Winnebago County, IL, and furthermore waive the right to trial by jury, Purchaser has read, understands and agrees to all the terms and conditions as outlined by the General Auto Parts, LLC invoice, including the terms and conditions on the reverse side thereof, Purchaser acknowledges receipt of the General Auto Parts, LLC invoice.