

CREDIT CARD AUTHORIZATION

I, the undersigned give permission and authorize **East Street Automotive**, 801 East Street, Memphis, TN 38104, to make the following charges on my credit card account:

Card Type: _____ Three-digit number on back of card: _____

Account #: _____

Expiration Date: _____

Name as It Appears On Card: _____

Credit Card Billing Address: _____

City, State & Zip Code: _____

Telephone Number: _____

Driver's License #: _____

Ship to: _____

Shipping Address: _____

City, State & Zip Code: _____

Amount Being Charged to Credit Card: _____

Invoice number _____

We ARE NOT RESPONSIBLE FOR DAMAGE ONCE THE PARTS LEAVES OUR BUSINESS

Deposits are non refundable, all returns are subject to 20% restock fee plus freight charges. Freight charges are non refundable. I have read and understand these conditions and will abide them.

X _____

Please complete this form and make a copy of your Driver's License and return by fax to: **901-947-3394**