



Credit Card Authorization

Card Holder Name: _____

Card Type: _____

Card Number: _____

Expiration Date: _____ / _____

Security Code: ____ ____ ____

Card Address:

Part Ordered:

Part Cost: \$

I, _____ **Authorize Busti Auto Parts to charge my card for the purchase of the agreed parts listed above. Parts will be shipped to the card holders address. NO EXCEPTION**

Signature:

Date:

**Busti Auto Parts
3383 Busti-stillwater rd
Jamestown, NY 14701**

**Phone: (716) 484-8930
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bustiautoparts@gmail.com**