1024 E. Broadway Rd. Phoenix, AZ 85040

Authorization # _

Work/Home FAX ()



Main Bus: (602) 268-8888 Main FAX (602)268-0317 Toll Free (800) 352 3751

Purchase Authorization or Authorization to use credit card

Date _____

| For | questions | concerning | your | order, | ask you | r sales | person_ |
|-----|-----------|------------|------|--------|---------|---------|---------|
|-----|-----------|------------|------|--------|---------|---------|---------|

| 1 Car | dholder Name & Billi | ng Addi | ress | 2 | | | | |
|----------------------------|------------------------------|---------|-------------|---|--------|------------|-------|--|
| Name | | | | Name | | | | |
| 1 | | | | Title | | | | |
| | | | | Company | | | | |
| Company Billing Address | | | | Shipping Address (No PO Boxes Please) | | | | |
| | e/Zip | | | City/State/Zip Name of Manager Approving this purchase: | | | | |
| E-mail Ac | Idress For UPS Tracking F | urposes | | | | | | |
| The above a | address is a Business | | | Phone () The above address is a 🗆 Business 🗆 Home | | | | |
| 3 ITE | MS ORDERED | | | | | | | |
| Part No. | Interchange No. | Qty. | Description | | Weight | Unit Price | Total | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

| | MPORTANT | umbor who | Total Weight of items | | Total Price of items | |
|--------------|-----------------------|-----------|--------------------------|--------------------------|-------------------------|-------|
| | regarding your order. | | | Add applicable Sales Tax | | |
| Home Phone | () | | | Shipping and Handling | | |
| Work Phone (| () | | | | | TOTAL |
| Cell Phone (|) | | | | | |

| | , | | | |
|--|--|--|--|--|
| 5 METHOD OF I | PAYMENT | Credit Card | Wire Transfer | |
| telephone and my signature REFUSE this shipment, th part without written authoriz agreed to in writing within 3 RESTOCK FEE. If return is the right to arrange all retur receipt. PRECISION is not | n Auto Parts to charge the order as described on my (e on this agreement is binding. This purchase is for n e Freight Charges will be charged to my credit card. I zation from PRECISION will void all Warranties. All co 30 days from the invoice date. All parts returned must s necessary, I will contact my salesperson so that PRI rns. DAMAGED MERCHANDISE: Claims for damage t responsible for Duties, Tariffs, Clearance, customs Tr S. Must Be Paid In U.S. Funds. ***ALL AIR BAGS | ew/ used parts, (FOB) to my destination understand that TAMPERING, DISAS ores must be returned complete and in be returned complete as shipped and ECISION may make arrangements for r during shipment must be made by pur ransfer, Export or Any Miscellaneous fe | n. I understand that if for any reason I SEMBLY OR MODIFICATION to this the kind and quantity unless otherwise are subject to a MINIMUM OF A 20% eturn shipments. PRECISION reserves chaser to the delivering carrier at time of es Not Shown On This Authorization. | |
| | | Verify Bank Phone Number Verification # | | |
| | | 3 digit numb | er on back of card | |
| Account Number | | | | |
| Expiration Date | | | | |
| Cardholder Signature | | [| Date | |

___ Ref # ___