



ALLIANCE AIR PARTS, INC.

1250 E. RENO AVENUE OKLAHOMA CITY, OKLAHOMA 73117 TELEPHONE: 405-548-2500

ACCOUNTING FAX: 405-548-2511 ORDERS & GENERAL FAX: 405-548-2510

CUSTOMER'S SIGNATURE AUTHORIZATION

For Credit Card Transactions

RETURN THIS FORM TO THE ACCOUNTING DEPARTMENT – FAX: 405-548-2511.

Also attach a legible copy of the front and back of your credit card. This process helps protect you, our customer against fraudulent charges. We thank you for your cooperation. Printing must be legible or we cannot process.

COMPANY NAME: _____

Card Billing Information

Name as shown on credit card: _____

Credit Card Billing Address: _____

City _____ State _____ Zip Code _____

Country: _____

Visa MasterCard Discover

Card Number _____

Security Code (CVV2): _____ Expiration Date: mm ____ yy ____

*CVV2 - the last 3 digits printed after the card number on the back of card

Card Holder's Signature Required: _____ Date: _____

NOTE: Illegible or incomplete information cannot be processed and will cause your order to be delayed or cancelled.

CHOOSE ONE:

Keep credit card information on file for future purchases

DO NOT keep credit card information on file

