



Ship to: 325 Eagle Dr.  
Winnipeg, MB R2R 1V4  
Mail to: PO Box 98, Stn L  
Winnipeg, MB R3H 0Z4

Tel. (204) 632-1366  
Fax. (204) 694-3143  
Toll Free 800-665-7556  
info@westernturbo.com

## Credit Card Authorization Form

\_\_\_\_\_  
Customer Name:  
\_\_\_\_\_  
Name on Card:  
\_\_\_\_\_  
Credit Card Number:  
\_\_\_\_\_  
Expiry Date on Card:  
\_\_\_\_\_  
Security Code (three digits on back of card):  
\_\_\_\_\_

CREDIT CARD TYPE (CIRCLE ONE):      VISA    M/C

ONE TIME INVOICE PAYMENT (PROVIDE INVOICE NUMBER): \_\_\_\_\_

INVOICE DATE: \_\_\_\_\_

INVOICE AMOUNT: \_\_\_\_\_

By this credit card document, I hereby give my complete approval to pay in full for all specific charges or services which I directly authorized with Western Turbo and Fuel Injection Ltd. I further agree to abide by all conditions as expressed on the invoice. We reserve the right to ask for additional identification documentation on orders exceeding \$100.00.

AUTHORIZED SIGNATURE (as it appears on credit card): \_\_\_\_\_

DATE (mm, dd, yyyy): \_\_\_\_\_

Fax to: **204-694-3143**

Mail to: **PO Box 98, Stn L, Winnipeg, MB R3H 0Z4**

Once you have completed this credit card authorization form, please fax the signed copy. Your order can not be completed until this authorization form is on file. This authorization form is to protect you, our valued client from fraud and unauthorized use of your credit card.

Form also available in PDF Format at [WWW.WESTERTURBO.COM](http://WWW.WESTERTURBO.COM) or email request to [info@westernturbo.com](mailto:info@westernturbo.com)