



Toll Free: 1-800-988-7260 · www.alamoturboschargers.com

CALGARY OFFICE:

Bay 30, 5225 – 6th Street NE, Calgary, Alberta, T2K 5Y4
Telephone: 403-274-6211 Facsimile: 403-275-4600

EDMONTON OFFICE:

Bay 4, 11643 – 180th Street, Edmonton, Alberta, T5S 2H6
Telephone: 780-487-6211 Facsimile: 780-487-6219

Credit Card Authorization Form

Complete and return via facsimile to the appropriate office noted above. We will be unable to process an incomplete form.

Please Print Clearly

Card Holder Name: _____

Company Name: _____

Billing Address of Credit Card: _____

Telephone Number: _____

Credit Card Number (Visa or Mastercard): _____

Expiry Date: _____ Security Code (from back of card): _____

I hereby certify that I am the card holder of record for the above card and request payment for invoice number(s) _____

in the amount of \$_____ be charged to the above noted credit card.

Signature of Card Holder: _____

Date: _____