



Titanium Auto Source LLC

3539 West Lincoln Street Phoenix, Arizona 85009

Credit Card Authorization Form

Please complete this form and return it to Fax: 602-272-0397

All information provided below remains confidential

Credit Card Information

Name: [Click here to enter text.](#) Phone Number: [Click here to enter text.](#)

Billing Address: [Click here to enter text.](#)

Shipping Address [Click here to enter text.](#)

Credit Card -- Visa Mastercard Discover American Express

Credit Card Number [Click here to enter text.](#) Expiration Date [Click here to enter text.](#)

Security Code (3 digits on the back of the card) [Click here to enter text.](#)

Authorized amount to be charged \$ [Click here to enter text.](#)

Item(s) being purchased [Click here to enter text.](#)

I, [Click here to enter text.](#) authorize Titanium Auto Source LLC to charge the amount listed above to the credit card information provided. I consent to the use of my card without my signature on the charge slip and that a photocopy of this agreement will serve as an original.

Card holder's signature _____ Date [Click here to enter text.](#)