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Item(s) Ordered:
Total Cost/Deposit Amt:
Name as it Appears on Card:
Billing Address:
City/State/Zip:
Credit Card Account #:
Expiration Date (mo./yr.):
3-Digit V-Code on back of Card (AMEX NOT ACCEPTED):
Shipping / Delivery Address (If diff. than billing):
Sales Tax ID # (If applicable):
By signing below you agree to the policies below and authorize U.S. Auto Supply to charge your credit card for the
amount listed above.
Signature of Cardholder:
Date of Purchase:
Phone:

* 45 DAY WARRANTY ON ALL PARTS *20% RESTOCK FEE APPLIED TO ALL APPROVED RETURNS *NO REFUNDS ON SHIPPING (BOTH WAYS) *NO WARRANTY ON LABOR *NO RETURNS ON ELECTRICAL ITEMS (NEW OR USED)