



CREDIT CARD CHARGE AUTHORIZATION FORM  
FOR EXCHANGE SALES

COMPANY NAME: \_\_\_\_\_

NAME ON CARD: \_\_\_\_\_

CARD'S BILLING ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

CARD NUMBER: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_/\_\_\_\_ SECURITY CODE (3 OR 4 DIGITS): \_\_\_\_\_

EXCHANGE SALE TERMS: CORE RETURN(S) MUST BE SAME PART NUMBER(S) AND MANUFACTURER AS SOLD, BE REPAIRABLE, AND MUST RETURN WITHIN 30 DAYS OF PURCHASE OR CORE VALUE(S) WILL BE CHARGED TO CREDIT CARD. CUSTOMER IS RESPONSIBLE FOR EXTRA COSTS IF CORE(S) EXCEED(S) STANDARD OVERHAUL. BY COMPLETING THIS FORM, CUSTOMER IS ACCEPTING THESE TERMS. TEARDOWN/ INSPECTION REPORT(S) CAN BE PROVIDED IF BACK-BILL CHARGES APPLY OR IF CORE (S) IS/ARE DEEMED 'B.E.R.'/NON-REPAIRABLE.

I/WE AUTHORIZE POWER PACKS PLUS TO CHARGE THE ABOVE CARD IN PAYMENT TO POWER PACKS PLUS IN THE EVENT THAT THE EXCHANGE TERMS STATED ABOVE ARE NOT MET.

\_\_\_\_\_  
Authorized Cardholder Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Cardholder's Name