



ISUZU

1971 Lakeland Ave. Ronkonkoma, NY 11779 Phone:(631) 471-1971 Fax: (631) 471-5588

DATE: _____

CREDIT CARD AUTHORIZATION FORM

I, _____, hereby authorize Capo Brothers, Inc. to charge
\$_____ to the following credit card:

We accept all major credit cards

Credit Card Number: _____ Expiration Date: _____

Name as it appears on the card: _____

Company Name: _____

Billing Address on card: _____

Authorized Signature: _____

- ◆ PLEASE RETURN THIS FORM VIA FAX IMMEDIATELY SO THAT WE MAY PROCESS THIS TRANSACTION PROMPTLY!

"A FULL SERVICE DEALERSHIP"

Quality is our Priority! Stop by and see the difference.