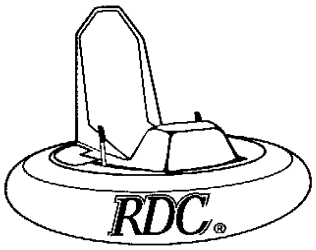
***R**ide*
***D**evelopment*
***C**ompany*

Post Office Box 40
Independence, OR 97351 USA
Tel: (503) 606-4438
Fax: (503) 606-4436
parts@bumpercar.com
www.bumpercar.com



CREDIT CARD AUTHORIZATION FORM

COMPANY NAME: _____

SHIPPING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE _____ FAX _____

VISA / MASTERCARD CARD #: _____

EXPIRATION DATE: _____ SECURITY CODE: _____

NAME ON CARD: _____

BILLING ZIP CODE: _____

For the following locations: _____

I hereby give Ride Development Company Permission to charge the above credit card for all parts orders for the above location(s).

☐ For RDC to keep form on file for future orders
Maximum Charge Authorized per Order: $_____ ⇦ **VERY IMPORTANT!**

☐ For RDC to use for one (1) order only *(form will be shredded after shipping)*
For invoice #_____ for a total of $_____ plus S/H

CARDHOLDER NAME: _____

CARDHOLDER SIGNATURE: _____

DATE: _____

*Please Return to RDC via **Fax** – (503) 606-4436*
*Or **Email** to parts@bumpercar.com*

This form MUST be filled out completely and returned to RDC before any parts orders will be *shipped.*
You may just put the last 4 digits of the cc, then call with the rest of the number.