# Canadian / US Fax Order Form

# Fax # (905) 814-1802

**First Name:** _____

**Last Name:** _____

**Phone:** _____

**Fax:** _____

**E-Mail Address:** _____

☐ I want to sign up as a preferred Customer

## Shipping and Payment

*** Credit Card Billing Address and the Shipping Address must be the same ***

**Name on Card:** _____

**Card Number:** _____

**Expiry Date:** _____

WE ACCEPT CREDIT CARDS

## Billing Address

**Street Address:** _____

**City:** _____

**Prov/State:** _____

**Postal/Zip Code:** _____

**Country:** _____

## Shipping Address

**Street Address:** _____

**City:** _____

**Prov/State:** _____

**Postal/Zip Code:** _____

**Country:** _____

| Quantity<br>1 case = 12 qts<br>1 qt = 946ml | Product Code / Description<br>Use AMSOIL product code or description with its name or mention the product application (e.ie 1 case engine oil for 1998 Nissan 300 ZX) |
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I hereby authorize Sinwal Inc to charge my credit card for the above order.

Signature: _____ Date: _____